

DISTRICT PROGRAM ISSUE

Fall 1958

Journal

North Carolina
Dental Society



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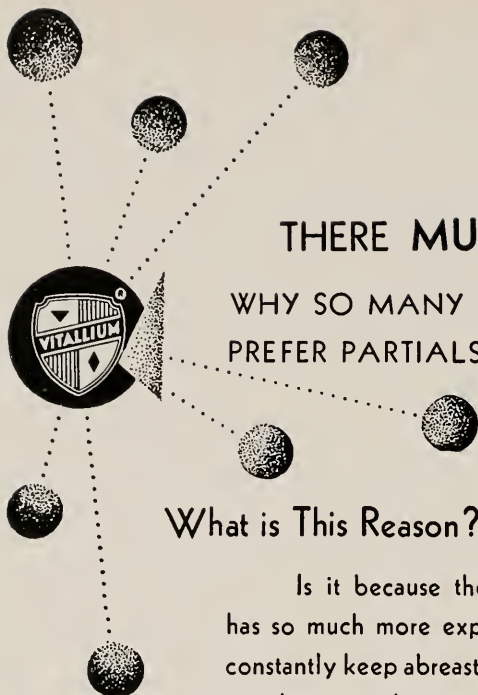
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VOLUME 42

SEPTEMBER, 1958

NUMBER 1



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THE JOURNAL of The North Carolina Dental Society

(A Constituent of the American Dental Association)

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New Bern

VOLUME 42

NUMBER 1

SEPTEMBER, 1958

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The Journal of the North Carolina Dental Society
Sincerely Dedicates This Issue to



Jesse Troy Lasley, D.D.S
Greensboro, North Carolina

The dental profession honors itself in paying tribute to this man, a true blue friend, one who hews to the line where principles of ethics are concerned. He is a devout member of his church, active in civic and community interests, always ready to aid his fellow practitioners as well as the patients who consult him. A man of very strong convictions, superlative character, devoted to his family, his profession and to those he serves.

The President's Page . . .

S. EVERETT MOSER, D.D.S.

Gastonia

I feel highly honored to have been elected president of the North Carolina Dental Society; but I am going to dismiss that honor briefly, because I know it was not your purpose when electing me president to confer just an honor upon me. The position of president of our society is not an honorary one, but a job bearing definite responsibilities — and intended to make possible definite accomplishments.

Because the position of president carries a great deal of responsibility — more responsibility, in fact, than any one man is capable of discharging—he is assisted by a staff of officers, by past officers, by the executive secretary, by committees, and, finally, by the co-operation of all the membership. Only through the combined efforts of all of us can we hope to accomplish all the objectives scheduled for the year ahead.

This need for co-operation is especially necessary in our organization. Your president, or your committee chairman, or any one member cannot do the job alone. He cannot by himself perform all of the duties required for the successful completion of our society's program. Without the successful completion of such a program, our society will degenerate to a mere social group for the enjoyment of members, rather than a medium for the enrichment of our knowledge of dentistry.

As president of the society, it is my duty to delegate the work load so that the most effective results may be obtained. This means that some



DR. MOSER

of you have been asked to serve on committees and others will be asked to co-operate with these committees.

I cannot stress too much the importance of committees. Incidentally, it is not especially an honor to be appointed on a committee. Such appointment is merely a recognition of certain abilities of members and an opportunity to devote those talents and abilities in a way that will be most useful. Serving on a committee is an obligation. It is also a responsibility.

Committee appointments have been completed. They appeared in the August (Proceedings) issue of the JOURNAL. I have every confidence that this year will be filled with achievement. Achievement made possible by the fine spirit and eager co-operation of all.

At the June meeting of the N. C.

State Board of Dental Examiners, sixty-six candidates presented themselves for examination and state licensure. Fifty-nine of the applicants successfully passed the examination and were granted a license to practice dentistry in our state. Those men who elect to remain in our state will be eligible for membership in the North Carolina Dental Society. As they locate in your community, contact them and tell them of the many advantages of becoming a member of organized dentistry. Explain to them that membership provides through state and ADA publications, the latest information on scientific developments. Show them that membership permits an exchange of views and ideas at local, district, state, and national meetings. Explain to them that it offers an opportunity to contribute to the advancement of dentistry through the presentation of clinics and scientific articles at meetings of all levels of our organization.

We in the society wage an incessant battle against quacks, charla-

tans and unethical laboratory practices. Tell them this, and invite them to help us. They will have a part in strengthening our dental legislation. As members, they will have an opportunity to obtain inexpensive life insurance through the American Dental Association's Group Life Insurance Program. Then, too, there are group health and accident plans and major hospital expense plans available to members through the North Carolina Dental Society at very reasonable rates.

Scores of good reasons can be given to the new licensee as to why he should become a member of organized dentistry early in his professional life. The district secretaries have all the necessary information for the completion of their application papers.

I am looking forward to seeing all of you at the five district meetings this fall, and I am particularly interested in seeing all of the new graduates inducted into membership in their respective districts.

We need them, and they need us.

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The President-Elect Speaks . . .

W. B. SHERROD, D.D.S.
Winston-Salem

I want to take this opportunity to congratulate those who have recently been licensed to practice the profession of dentistry. I wish it were possible for me to tender these words of greetings personally, and to extend to these recent licensees a most cordial invitation to become members of the North Carolina Dental Society through their districts.

As we enter the one hundred and third year of organized dentistry in North Carolina our society is strong, virile and dynamic. If our society is to maintain its prestige and make progress it is incumbent upon the members to impart to the newcomers the definite advantages of organized dentistry. To do otherwise is to regress.

The meaning and advantages of organized dentistry are well known and appreciated by the members of our society. To the newly licensed, with rare exception, the value and advantages of organized effort are not so apparent.

The benefits of membership in organized dentistry are many. Belonging to a group with a common purpose and common goal, sharing its pleasures, advantages and work is an enriching experience. Then there is the excellent educational program made available at all levels. Each year thousands of dollars are expended in providing a program of lectures and clinics at district, state and national meetings. These fine scientific programs are designed to impart knowledge and know-how in



DR. SHERROD

order that all of us might stay abreast of the times, become more efficient and therefore render finer service to the public.

We as society members have available to us excellent health insurance plans, at nominal cost. The benefits under these plans are real, practical, and generous and they are not available to individuals. These advantages should be brought to the attention of our new licensees and prospective members.

Let me again urge all members of our society to seek out the newcomers to our profession, invite them, interest them, and bring them within the fold of our society. We have much to offer them; and by the same token they can add vitality, strength and imagination to organized dentistry. For only in unison can we bulwark the past gains and assure our future.

First District Dental Society

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H. D. Froneberger	President-Elect
C. B. Taylor	Vice President
A. L. Poovey	Secretary-Treasurer
M. M. Forbes	Editor

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W. J. Turbyfill		Ralph D. Coffey

First District Adds Something New To Program

C. Z. CANDLER, JR., D.D.S.
President



DR. CANDLER

The next annual meeting of the First District Dental Society will begin on Saturday, October 4, 1958, and will extend through Monday, October 6. The extension of the meeting date has been necessitated because of the increased activities planned for the members, their wives and guests. For example, a cook-out complete with barbecued ribs and chicken with all the trimmings has been planned for Saturday evening followed by three hours of dancing in the ballroom of the Grove Park Inn, the site of our meeting.

The Local Arrangements Committee, under the direction of Dr. Fenton Cunningham, has worked hand-in-hand with the Grove Park Inn to the end that this will be as fine a meeting as we have ever had.

Our Program Committee under the chairmanship of President-Elect Dr. Dan Froneberger has engaged

the services of Dr. Robert Shira who will speak on "Surgical Preparation of the Mouth for Prosthetic Replacement," Monday morning. Lt. Col. Edwin H. Smith, Jr., will speak on Monday afternoon.

It is sincerely hoped that all members, their wives and families will make every effort to attend and enjoy the entertainment and scientific sessions which are planned, and at the same time spend a few relaxing days at Grove Park Inn.

A most cordial invitation is extended to all members of the N.C.D.S. and their families to attend and enjoy the fellowship of this meeting.

Reservations may be made by contacting Dr. Auburn Poovey, Bernard Building, Hickory, N. C. or by writing directly to the Grove Park Inn, Asheville, N. C.

Program

First District Dental Society

Grove Park Inn, Asheville, North Carolina, October 4-6, 1958

SATURDAY, OCTOBER 4

4:00-6:00	P.M.	Registration.....	Lobby, Grove Park Inn
6:00	P.M.	Cook-out.....	Grove Park Inn
9:00-12:00	P.M.	Informal Dancing.....	Grove Park Inn

SUNDAY, OCTOBER 5

11:00	A.M.	Golf Tournament.....	Asheville Country Club
2:00-6:30	P.M.	Registration.....	Lobby, Grove Park Inn
5:30-6:00	P.M.	Social Hour.....	Sunset Terrace
		(All dentists, their wives and honor guests cordially invited to attend.)	
6:30	P.M.	Buffet.....	Plantation Room
		(No charge for members of First District, their ladies and honorary guests.)	
8:00	P.M.	General Session.....	Auditorium
		Call to Order—Dr. C. Z. Candler, President	
		Invocation—Dr. W. D. Yelton	
		Necrology Report—Dr. Frank Rich	
		Address of Welcome—Mr. Charles Newcombe, Manager, Asheville Convention Bureau	
		Introduction of Visitors—Dr. F. S. Cunningham	
		Minutes of Last Meeting—Dr. A. L. Poovey	
		Treasurer's Report—Dr. A. L. Poovey	
		Old Business—New Business	
		Receiving of Membership Applications	
		Committee Reports	
		Election of Officers	
		Adjournment	

MONDAY, OCTOBER 6

8:30	A.M.	Registration.....	Grove Park Inn
9:00	A.M.	General Session	
		Presentation of New Members—Dr. C. B. Taylor	
		Charge to New Members—Dr. W. J. Turbyfill	
9:30	A.M.	"Surgical Preparation of the Mouth for Prosthetic Replacement"—Colonel Robert B. Shira	
11:00	A.M.	Table Clinics	
1:00	P.M.	Luncheon	
		Recognition of Visitors	
2:00	P.M.	"Immediate Denture Service and Relining of Complete Dentures"—Lt. Col. Edwin H. Smith, Jr.	
3:30	P.M.	Final Business Session	
		Golf Awards and Door Prizes—Dr. R. R. Hoffman	
		Installation of Officers	
		Adjournment	

First District Clinicians

Monday, October 6, 9:30 a.m.

ROBERT B. SHIRA

Colonel, Dental Corps, U. S. Army
Washington, D. C.

"SURGICAL PREPARATION OF THE MOUTH FOR PROSTHETIC REPLACEMENTS"

Colonel Shira is Chief, Oral Surgery, Walter Reid Hospital, Washington, D. C.

He will cover the diagnosis and management of the various surgical procedures associated with the preparation of the mouth for prosthetic replacements from the viewpoint of the general practitioner.



COLONEL SHIRA

Monday, October 6, 2:00 p.m.

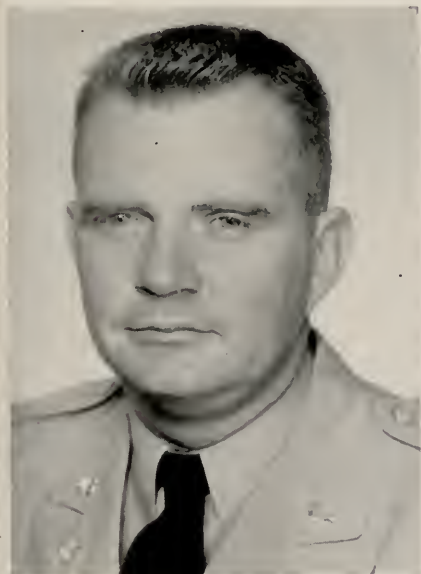
EDWIN H. SMITH, JR.

Lieutenant Colonel, Dental Corps
U. S. Army
Washington, D. C.

"RELINING PROCEDURES FOR COMPLETE DENTURES"

Lieutenant Colonel Smith is presently Assistant Chief, Career Planning and Assignment Section, Dental Division, Office of the Surgeon General.

He will present a lecture with color slides on a technique for relining complete dentures. Because of the difficulties encountered with these procedures emphasis will be placed on the small but important details that may help to alleviate source of the failures.



LIEUTENANT COLONEL SMITH

First District

Table Clinics

MONDAY, OCTOBER 6, 11:00 a.m.

1. "Multiple Tooth Preparation for Crown and Bridge," "Copper Band Splint as a Temporary Bridge"—Dr. Leonard J. Barber.
2. "Apicoectomy for the General Practitioner"—Dr. David H. Becker.
3. "Spot Welded Bands in Alloy Restorations"—Dr. Albert P. Cline, Jr.
4. "New Approach to Endodontia"—Dr. J. G. Crowell.
5. "Differential Diagnosis Between Pulpal and Periodontal Pain"—Dr. C. Don Gerdes.
6. "A Simple Bite Jumping Appliance"—Dr. R. H. Graham.
7. "Removable Partial Denture Design Rationale"—Dr. Norman J. Holly.
8. "Ceramics for the Dental Practitioner"—Dr. W. J. Lucas.
9. "Combined Copper Band and Rubber Base and Impression Technique"—Dr. F. E. Martin.
10. "Elastic Impression of Mandibular Arch With Personalized Tray"—Dr. C. A. Pless, Jr.
11. "Preventive Orthodontia by the General Practitioner"—Dr. Eugene N. Shapiro.
12. "Full Denture Technique—Employing Alginate, Custom-made Tray and Rubber Base"—Dr. William Powell.

Dental Manufacturer Blasts Union Leaders

Randolph Babcock, president of Pelton and Crane of Charlotte, makers of dental and surgical equipment, blasted what he termed as the corrupt and high handed methods of today's labor leaders.

Speaking before the Shelby Rotary Club in June, Babcock said "I'm 100 per cent for labor, but 100 per cent against its irresponsible leaders and against today's big labor unions which have gotten completely out of hand."

He described his company's move from Detroit to Charlotte four years ago as the best thing that ever happened to Pelton and Crane.

"In 1956, the first full year of operations we had in Charlotte," he declared, "we had the best volume and profits in the history of our company."

"This," he added, "in spite of the fact that we were using an entirely new labor force working with machinery new to them."

Babcock said that his Charlotte employees in six months were producing with greater efficiency than the company had ever gotten from labor in Detroit. He urged his listeners to be alert to the problems that go with further industrialization of the South.

"You don't have labor unions now, thank God," he told the Shelby Rotarians, "keep them out."

Second District Dental Society

OFFICERS

Thomas G. Nisbet.....	President
Boyce A. Brawley.....	Vice President
J. P. Reece.....	President-Elect
James A. Harrell.....	Secretary-Treasurer
Clarence F. Biddix.....	Editor

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W. F. Yelton, Chairman			
L. C. Holshouser	J. P. Reece	Boyce A. Brawley	Thomas G. Nisbet
		James A. Harrell	

Delegates to North Carolina Dental Society

Riley E. Spoon, Jr.	E. U. Austin
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Program Committee

J. P. Reece, Chairman	
W. S. Perry	Vaiden B. Kendrick

Table Clinic Committee

Vaiden B. Kendrick, Chairman	
N. J. Duncan	C. A. Jarrett

Projected Clinic Committee

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G. A. Lazenby	J. H. Spillman

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	E. C. Morris

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D. L. Beaver	J. L. Ashby

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J. G. Rehm	L. H. Short
	L. R. Thompson

Auditing Committee

M. J. Hoffman, Chairman	
J. W. Zimmerman, Jr.	O. W. Owen

(Continued on page 14)

Two Good Reasons To Attend Second District Meeting

THOMAS G. NISBET, D.D.S.
President



DR. NISBET

On behalf of the officers of the Second District Dental Society, I want to invite you to our annual meeting which will be held September 28 and 29 at the Hotel Charlotte in Charlotte.

There are two good reasons why members of the Second District should attend: first, it is your duty to attend meetings of your organization and participate in its deliberations; second, a fine scientific program has been arranged, and you will increase your professional knowledge by seeing and hearing the program. The latter serves as a good reason for you from other districts to attend. We cordially invite you to be with us.

Our major clinicians are two of the most widely accepted clinicians in the country. Dr. Philip Jay of Ann Arbor, Michigan, will address us on

"The Etiology and Control of Caries," and Dr. Ben Dent of Memphis, Tennessee, will discuss "Silicate Restorations." Except for a business session during the luncheon meeting, we plan to devote the entire day, Monday, to the scientific program.

We are very hopeful that Dr. Sandy Marks, a dental missionary home on furlough from the Belgian Congo, will be able to address our banquet on Sunday night.

I would like to express my appreciation and gratitude to the officers, committeemen and the Woman's Auxiliary for their efforts to make this a profitable and enjoyable meeting.

COMMITTEES—SECOND DISTRICT—(Continued)

Insurance Committee

D. L. Ballard	R. P. Melvin, Chairman	F. C. Slaughter
	E. M. Funderburk	

Golf Committee

P. A. Stroup, Jr.	J. William Heinz, Chairman	E. U. Austin
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Program

Second District Dental Society

Hotel Charlotte, Charlotte, North Carolina, September 28-29, 1958

SUNDAY, SEPTEMBER 28

11:00 A.M.-5:00 P.M.	Registration	Lobby
11:00 A.M.-5:00 P.M.	Golf Tournament.....	Carmel Country Club
12:00 NOON	President's Luncheon	
1:00 P.M.	Final Meeting Executive Committee	
5:30 P.M.	Social Hour	
6:30 P.M.	Banquet	
	Awarding Golf Prizes	
	Induction of New Members	
	Entertainment	
8:30 P.M.	Opening Session	
	Call to Order—President Nisbet	
	Invocation	
	Recognition of State Society Officers	
	Committee Reports:	
	Report of Nominating Committee	
	Election of Officers	

MONDAY, SEPTEMBER 29

9:00 A.M.-2:00 P.M.	Registration	Lobby
9:00 A.M.-10:30 A.M.	Table Clinics	
9:30 A.M.-10:30 A.M.	Projected Clinics	
10:30 A.M.	“Present Status of Dental Caries Control Measures” —Dr. Philip Jay, Professor of Dentistry, University of Michigan School of Dentistry, Ann Arbor, Michigan	
12:30 P.M.	Adjourn for Lunch	
1:00 P.M.	Business Luncheon	
	Dr. John C. Brauer, Dean, University of North Carolina School of Dentistry	
	President's Address—Dr. Thomas G. Nisbet	
	New Business	
	Installation of New Officers	
2:30 P.M.	“Silicate Restorations”—Dr. Ben Dent, Memphis, Tennessee	
4:30 P.M.	Closing Business Session	
	Committee Report on the President's Address	
	Unfinished Business	
	Adjournment	

Second District Clinicians

Monday, September 29, 10:30 a.m.

PHILIP JAY, M.S., D.D.S.

Ann Arbor, Michigan

"PRESENT STATUS OF DENTAL CARIES CONTROL MEASURES"

Dr. Jay is Professor of Dentistry and Director of the Dental Caries Control Laboratory at the University of Michigan. He has been a consultant to the United States Public Health Service in studies relating to fluoride and dental caries.

His principal interests have been the bacteriology of dental caries, the relationship of the lactobacilli to dental caries, and the significance of



DR. JAY

the nutritional role of carbohydrates in dental caries activity.



DR. DENT

Monday, September 29, 2:30 p.m.

BEN DENT, D.D.S.

Memphis, Tennessee

"SILICATE CEMENTS"

Dr. Dent is a practicing dentist in Memphis where he is on the staff of four hospitals. He is a graduate of the University of Tennessee School of Dentistry and is widely known as an author, research scientist and lecturer.

His presentation will be illustrated with color slides and will deal with the restoration of the incisal angle, causes for failure in silicates, pulp protection, cavity sterilization, and a comparison of the various silicate cements.

Second District

Table Clinics

MONDAY, SEPTEMBER 29, 9:00 a.m.

1. "Crown and Bridge"—Dr. Stuart A. Barksdale.
2. "Eliminating Need for Cotton Rolls or Rubber Dam for Lower Fillings"—Dr. J. William Heinz.
3. "Occlusal Corrections in Temporomandibular Joint Disturbances"—Dr. Charlie M. Johnston.
4. "Unusual Pedodontic Cases"—Dr. Barry G. Miller.
5. "A Method of Replacing Acrylic on Veneer Crowns"—Dr. S. D. Petersen, Jr.
6. "Post-Operative Surgical Care"—Drs. Grady L. Ross and Dean C. Couch.
7. "Modified Tray and Impression Technics"—Dr. J. O. Thorpe.
8. "Fundamentals in Occlusal Equilibrating"—Drs. B. N. Walker and G. C. Stowe.

Table clinics will also be presented by Dr. Ozzie J. Freund and Dr. J. H. Spillman. Titles are to be announced later.

Projected Clinics

MONDAY, SEPTEMBER 29, 9:30 a.m.

1. "Conservative Reduction of Possible Cystic Lesions"—Dr. J. B. Freedland.
2. "Disharmonies of Occlusion in Prosthodontics"—Dr. Henry C. Parker.
3. "Orthodontic Treatment for Adults"—Dr. Richard F. Scherer.
4. "Oral Surgery"—Dr. Charles M. Westrick.

District Officers Conference Set for Greensboro Dec. 6-7

The Sixth Annual District Officers Conference will be held at Sedgefield Inn, Greensboro, Saturday and Sunday, December 6 and 7, according to Dr. E. A. Pearson, Jr., President of the Conference. Dr. A. L. Poovey of Hickory is Secretary.

The conference includes officers and editors of the five district societies which comprise the North

Carolina Dental Society. The annual get-together is for the purpose of training new officers and for discussing mutual problems of the district officers. The conference was begun in 1953 during the administration of Dr. Neal Sheffield.

The program for the 1958 meeting will be announced in the *News-letter* at a later date. Dr. Pearson has urged conference members to set aside December 6-7 on their appointment books for this meeting.

Third District Dental Society

OFFICERS

S. P. Gay.....	President
W. K. Griffin.....	President-Elect
M. R. Hunter.....	Vice President
W. P. Hinson, Jr.....	Secretary-Treasurer
C. B. Wolfe.....	Editor

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W. K. Griffin	J. R. Wheless	H. Estes	Butler

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Henry V. Murray		Norman F. Ross

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Necrology Committee

C. D. Kistler, Chairman		
J. B. Newman		T. R. Zimmerman

Membership Committee

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Guy R. Willis	R. E. Kilpatrick	L. P. Megginson, Jr.

Golf Committee

E. M. Medlin	G. F. Kirkland, Jr.	P. B. Whittington, Jr.
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House of Delegates

C. W. Poindexter		T. E. Sikes, Jr.
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Third District to Gather at Mid Pines

S. P. GAY, D.D.S.
President



DR. GAY

The Third District Dental Society is happy to welcome members and friends to the annual meeting at the beautiful Mid-Pines Club, Southern Pines, Sunday, October 19 and Monday, October 20.

Your officers and committee members have worked hard to make this meeting instructive as well as entertaining. For this we express our very sincere thanks to each.

We have acquired two clinicians who, we think, will please you. Dr. Richard Chace, Orlando, Florida, one of the South's leading periodontists will lecture and present a clinic on Periodontics. Captain Milton H. Brown of the Naval Hospital, Bethesda, Maryland, will lecture and give a clinic on Prosthodontics. As usual, several of our own members will present well prepared, informative, table clinics.

One of the more important phases of the meeting is the pleasure of

being together and sharing information and experiences. In this connection we particularly invite the presence and participation of all new members. We are sure they have much to contribute in youth and enthusiasm and much to gain in knowledge and experience by associating themselves with their professional organization at the beginning of their careers.

Your Arrangements Committee is due special thanks for its effort in seeing that every thing possible will be done for the convenience and enjoyment of every one in attendance.

We extend the warmest welcome to the auxiliary members who, under the enthusiastic leadership of Mrs. Dan Carr of Durham, will find a well prepared program for their pleasure.

So give yourself and your helpmeet a break. Join us to make this meeting one to remember.

Program
Third District Dental Society

Mid Pines Club, Southern Pines, North Carolina, October 19-20, 1958

SUNDAY, OCTOBER 19

- 11:00 A.M. Golf Tournament
- 2:00 P.M. Registration
- 5:30-6:30 P.M. Social Hour
- 7:00 P.M. Banquet—Favors—Entertainment
- 8:30 P.M. Opening Session (Business Meeting)
- Meeting called to order by President S. P. Gay
Invocation
President's Address
Report of Secretary-Treasurer
Recognition of State Dental Society Officers
Introduction of Visitors
Remarks on Dental Foundation—Dr. J. C. Brauer
Presentation of New Members—Secretary
Election of Officers
Announcements
Adjournment

MONDAY, OCTOBER 20

- 8:00 A.M. Breakfast
- 8:00-9:00 A.M. Registration
- 9:00-10:15 A.M. Table Clinics
- 10:30-12:30 P.M. "Periodontics in General Practice"—Dr. Richard Chace
- 12:45-2:00 P.M. Luncheon and Golf Luncheon
- 2:00-3:30 P.M. "A Critical Analysis of the Distal Extension Partial
Denture"—Captain Milton H. Brown, D.C., U.S.N.
- 3:30 P.M. Final Business Session
- Committee Reports
Report on President's Address
Old-New Business
Selection of Next Place of Meeting
Installation of Officers
Adjournment

Third District Clinicians

Monday, October 20, 10:30 a.m.

RICHARD CHACE, D.D.S.
Orlando, Florida

"PERIODONTICS IN GENERAL PRACTICE"

Dr. Chace is not only a third generation Floridian but he also is a third generation dentist. He is a graduate of Northwestern University Dental School and is a Diplomat of the American Board of Periodontology.

He will present techniques that are adaptable for the General Practitioner and will illustrate cases that can be treated by the average



DR. CHACE

dentist and those which should be referred to experts.

Monday, October 20, 2:00 p.m.

MILTON H. BROWN
Captain, Dental Corps, U. S. Navy
Bethesda, Maryland

"A CRITICAL ANALYSIS OF THE DISTAL EXTENSION PARTIAL DENTURE"

Captain Brown heads the Prosthodontic Division of the United States Naval Dental School in the National Naval Medical Center in Bethesda, Maryland. He is a native of Greenville, South Carolina, and is a graduate of Atlanta Southern Dental College.

He will evaluate the distal extension partial denture problem and will offer a solution by supplying adequate tooth and tissue support. His lecture will be illustrated with 35mm. slides.



CAPTAIN BROWN

Third District

Table Clinics

MONDAY, OCTOBER 20, 9:00 a.m.

1. "Fixture and Removal of Precision Restorations"—Dr. Baxter B. Sapp, Jr., and Dr. Norman F. Ross.
 2. "The Everyday Practice of Endodontics"—Dr. R. J. Shankle.
 3. "Simplifying Removal of Impacted Third Molars"—Dr. L. M. Foushee.
 4. "Preparation of Mouth for Immediate Dentures"—Dr. O. R. McKenzie.
 5. "Orthodontics as Related to General Practice"—Dr. A. R. Tannenbaum.
 6. "Prosthetics"—Dr. N. R. Callaghan, Jr.
 7. "Periodontia"—Dr. G. F. Kirkland, Jr.
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Scrap Amalgam Drive March 9-14

The North Carolina Dental Auxiliary has designated the week of March 9-14, 1959, for its annual Scrap Amalgam Drive. Mrs. J. Walton Branham of Raleigh, chairman of the drive for this year, has announced a goal of \$2,000 and has urged dentists to begin saving their scrap amalgam early so that the goal can be assured.

All proceeds from the drive go to the North Carolina Dental Society Relief Fund, Mrs. Branham emphasized. This is the fifth year the Auxiliary has sponsored the campaign, she pointed out, and during that time the Auxiliary has raised \$7,746.74 for the Relief Fund.

Aside from proceeds from the A.D.A. Relief Fund Seal Campaign, the Scrap Amalgam Drive sponsored by the Auxiliary provides the only source of income for the N.C.D.S.

Relief Fund, which has been in operation now for 30 years.

President S. Everett Moser has endorsed the drive wholeheartedly and has commended the Auxiliary for its efforts in the past.

"I urge all members to back this drive 100 per cent," Dr. Moser said, "that we might reach the \$2,000 goal. With the co-operation of all the members, the goal can be attained and I certainly hope it will."

N.C.D.S. Relief Fund Receives \$942.50

The North Carolina Dental Society Relief Fund has received a check for \$942.50 from the A.D.A. Relief Fund. This represents one-half the amount contributed by members of the North Carolina Dental Society to the 1957-58 annual Relief Fund Seal Campaign.

North Carolina dentists contributed a total of \$1,885 or 143.9 per cent of the quota assigned of \$1,310.

Fourth District Dental Society

OFFICERS

Marvin T. Jones, Jr.....	President
E. A. Pearson, Jr.....	President-Elect
C. H. Bryan.....	Vice President
J. B. Powell.....	Secretary-Treasurer
Robert T. Bryd.....	Editor

COMMITTEES

Executive Committee

Paul T. Harrell	L. J. Moore
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Program Committee

E. D. Baker	T. G. Collins, Chairman	Glenn Bitler
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Clinic Committee

J. R. Edwards, Jr.	Nash Underwood, Chairman	Richard S. Hunter
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Mental Institutions Committee

J. R. Prugh	J. H. Rose, Jr., Chairman	G. L. Hooper
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Entertainment Committee

J. A. Pearce	H. O. Lineberger, Jr., Chairman	M. P. Nicholson
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Publicity Committee

Robert T. Byrd	R. P. Hamilton, Chairman	H. E. Maxwell
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Membership Committee

Paul T. Harrell	C. W. Sanders, Chairman	H. R. Chamblee
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Ethics Committee

T. M. Hunter	G. L. Hooper, Chairman	Marcus R. Smith
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Hospitality Committee

Paul Fitzgerald, Jr.	L. M. Massey, Chairman	J. Henry Ligon, Jr.
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Constitution and By-Laws Committee

G. Fred Hale	Walter H. Finch, Chairman	D. L. Pridgen
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School Health Committee

E. D. Baker	S. L. Bobbitt, Chairman	Robert E. Finch
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A.D.A. Relief Committee

Everette L. Smith	Wilbert Jackson, Chairman	Walter L. McRae
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Post Graduate Study Course

S. B. Towler	J. R. Edwards, Chairman	J. Henry Ligon, Jr.
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Necrology Committee

E. A. Pearson, Jr.	W. Howard Branch, Chairman	J. M. Pringle
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Fourth District to Assemble at Raleigh

MARVIN T. JONES, JR., D.D.S.
President

We are looking forward to a good meeting of the annual meeting of the Fourth District Dental Society which will be held September 22-23. The banquet will be on Monday night at seven o'clock at the Sir Walter Hotel in Raleigh. The Entertainment Committee has worked hard in arranging this banquet, and I am sure that we will all have a good time. Then on Tuesday, September 23, the General Session will be held. The Program and Clinic Committees are arranging a good program for the day and I hope that we will avail ourselves with the opportunity of attending this meeting.

To the state officers, members



DR. JONES

from other districts and visitors from other states, we extend a special invitation and a cordial welcome.

I want to extend my personal thanks to all who have given so freely of their time and effort to make this an instructive and enjoyable meeting.

Get Your Copy at Your District Meeting

THE N. C. DENTAL FORMULARY

Published jointly by The North Carolina Dental Society
and The North Carolina Pharmaceutical Association

OVER 100 PAGES, BOUND IN A FLEXIBLE
BLACK PLASTIC LOOSELEAF BINDER, FOUR
MAJOR SECTIONS—

**PRESCRIPTIONS — PATIENT MEDICATION —
OFFICE MEDICATION — EMERGENCIES IN THE DENTAL
OFFICE, PLUS AN INDEX AND LIST OF
MANUFACTURERS**

Fourth District Clinician

Tuesday, September 23, 10:30 a.m.

MARVIN M. SUGARMAN
D.D.S., F.I.C.D.
Atlanta, Georgia

"THE SCORE IN PERIODONTAL THERAPY TODAY"

Dr. Sugarman is Assistant Professor in Periodontics at Emory University. He is a Diplomate of the American Board of Periodontology, a Fellow of the International College of Dentists and Consultant to the Surgeon General, U. S. Army. Many of his articles have been published in the *Journal of Periodontology and Oral Surgery, Oral Medicine and Oral Pathology*. He has lectured before dental and medical organiza-



DR. SUGARMAN

tions throughout the United States including the Greater New York Meeting, the Chicago Midwinter Meeting and the American Dental Association.

Wake County Gets New Dentist

Dr. David Masters, formerly with the Division of Oral Hygiene of the State Board of Health in Fayetteville, is now filling the long-vacant post of county dentist with the Wake County Health Department in Raleigh. Until his recent appointment Dr. Masters had served with the Division of Oral Hygiene since his graduation from the University of Tennessee in 1956. He is a member of the Fourth District Dental Society.

The post of county dentist in Wake was left vacant in July of 1957 when Dr. Thomas Harris resigned to open a private practice in Greensboro.

Dr. Shaffer Named President of the Board

Dr. S. W. Shaffer of Greensboro has been elected president of the N. C. State Board of Dental Examiners for the coming year. He succeeds Dr. Darden J. Eure of Beaufort.

Dr. J. Homer Guion of Charlotte will succeed himself as secretary-treasurer of the Board. Announcement of the election of the officers was made following a meeting of the Board in Raleigh July 13 when licenses were issued to 59 dentists and 16 dental hygienists.

Program
Fourth District Dental Society

Hotel Sir Walter, Raleigh, North Carolina, September 22-23, 1958

MONDAY, SEPTEMBER 22

6:30 P.M. Social Hour

7:00 P.M. Banquet
Entertainment

TUESDAY, SEPTEMBER 23

8:00 A.M. Registration

9:00 A.M. Meeting Called to Order, President Dr. Marvin T. Jones, Jr.
Invocation, Dr. H. R. Chamblee
Secretary and Treasurer's Report, Dr. J. B. Powell
President's Address
Recognition of N. C. Dental Society Officers
Necrology Report
Introduction of Visitors, Dr. E. D. Baker
Presentation of Candidates for Membership, Dr. C. W. Sanders
Committee Reports

10:30 A.M. "The Score in Periodontal Therapy Today"—Dr. Marvin M. Sugarman, Atlanta, Ga.

12:30 P.M. Luncheon

2:00 P.M. Table Clinics

4:00 P.M. Business Session

Table Clinics

TUESDAY, SEPTEMBER 23, 2:00 p.m.

1. "Removable and Stationary Splints for Periodontally Involved Teeth," Dr. H. Royster Chamblee.
2. "Occlusal H," Dr. Joseph M. Johnson.
3. "Contact?," Dr. C. P. Osborne, Jr.
4. "A Method for Re-Basing Dentures," Dr. S. B. Towler.

Fifth District Dental Society

OFFICERS

Charles B. Johnson (New Bern).....	President
Charles S. Cooke.....	President-Elect
Donald L. Henson.....	Vice-President
W. H. Gray, Jr.....	Secretary-Treasurer
C. T. Barker.....	Editor

COMMITTEES

Executive Committee

C. B. Johnson (New Bern)	Donald L. Henson	Charles S. Cooke	W. H. Gray, Jr.
Z. L. Edwards		H. J. Thompson	

House of Delegates

Charles T. Barker	Coyte M. Minges	Paul E. Jones	W. W. Umphlett
	R. Fred Hunt		

Program Committee

Charles S. Cooke, Chairman	
Charles P. Godwin	A. Dwight Johnson

Membership Committee

Donald L. Henson, Chairman			
J. M. Zealey	Wallace Griffin	R. Fred Hunt	Robert Gilbert

Arrangements and Publicity Committee

Horace K. Thompson, Chairman	R. B. Morrison, Co-Chairman		
Sidney V. Allen	James E. Furr	D. B. Seitter, Jr.	E. Stewart Benson
Guy E. Pigford	C. A. Thomas	John E. Fraser	W. B. Belois
James H. Smith	Robert A. Hollis	Alton R. Fales	Ramsey Weathersbee
R. B. Barden	A. L. Harris	Junius C. Smith	J. O. Broughton
Bobby M. Russ		Ramsey Weathersbee, Jr.	

Dental Caries Committee

C. C. Gooding	Roy A. Miller, Jr.	Alan Stoddard
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Ethics Committee

C. E. Minges, Chairman	
Darden J. Eure	Paul E. Jones

Resolutions Committee

H. K. Thompson	Z. L. Edwards	R. A. Daniel, Jr.
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Necrology Committee

C. D. Eatman, Chairman	
R. A. Wilkins	Junius C. Smith

Constitution and By-Laws Committee

Paul E. Jones, Chairman	
G. L. Overman	C. B. Johnson (Jacksonville)

Relief Committee

Clyde E. Minges	R. Fred Hunt	Dewey Boseman
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Auditing Committee

E. L. Eatman, Chairman	
Dan Wright	A. T. Jennette

National Dental Health Week Committee

Roy A. Miller, Jr., Chairman			
C. C. Gooding, Co-Chairman	Alan Stoddard, Co-Chairman		
Ben Houston	C. D. Eatman	J. M. Zealey	Dan Wright
Z. L. Edwards, Jr.	Wallace Griffin	Bobby M. Russ	Artis D. Johnson



DR. JOHNSON

Fifth District Invites You to The Surf Club

CHARLES B. JOHNSON, D.D.S.
President

On September 21 and 22 Wilmington will be host to the Fifth District Dental Society and Auxiliary at the Surf Club on Wrightsville Beach. We are very pleased with the wonderful facilities. You will enjoy the opportunities offered for swimming in the ocean and the excellent fishing. I want to urge all members to attend and to bring their wives. Special entertainment has been arranged for the ladies.

When you receive your postal reply card concerning hotel reservations, please fill it out and mail it promptly. If you wish to arrange for a vacation so you can do some serious fishing contact: Dr. H. K. Thompson or Dr. B. R. Morrison of Wilmington. They will be happy to provide the necessary information concerning hotel accommodations and names of boat captains for fishing trips.

Under the leadership of Dr.

Charles Cooke, Chairman of the Program Committee, an interesting scientific program has been arranged. Dr. Charles T. Barker, Chairman of the Clinic Committee, promises several interesting Clinics.

A warm welcome is extended to all members of the North Carolina Dental Society to be with us and enjoy our scientific and social events.

I wish to extend my personal thanks to all the officers and committees of the Society who have given so freely of their time and effort to make this a successful year and our annual meeting an instructive and enjoyable occasion; and to thank the Society for the privilege of serving two years as your secretary, president-elect and this year as your president. Dentistry has been good to me and I hope that I have been able to make a small contribution as partial payment for what it has bestowed upon me.

Program
Fifth District Dental Society

Surf Club, Wrightsville Beach, North Carolina, September 21-22, 1958

SUNDAY, SEPTEMBER 21

1:00 P.M. Fishing

5:00 P.M. Registration and Fellowship

7:00 P.M. Dinner

Invocation—Rev. C. M. McKimmon, Pastor, First Presbyterian Church, Wilmington, N. C.

Awarding of Prizes

Address of Welcome—The Honorable R. A. Dunlea, Mayor, Wrightsville Beach; the Honorable J. E. L. Wade, Mayor, Wilmington

Response to Welcome—Dr. Darden J. Eure

Introduction of Guests—Dr. Horace K. Thompson

Entertainment

MONDAY, SEPTEMBER 22

9:00 A.M. General Session

Meeting called to order by President Charles B. Johnson, New Bern, N. C.

Invocation—Rev. C. M. McKimmon, Pastor, First Presbyterian Church, Wilmington, N. C.

Minutes of Last Meeting

President's Address

Report of Necrology Committee

Presentation of Applicants for Membership

Charge to New Members—Dr. Z. L. Edwards

Greetings from North Carolina Dental Society Officers

Greetings from U.N.C. School of Dentistry—Dr. John C. Brauer

Introduction of Visitors—Dr. Paul E. Jones

Election of Officers

10:30 A.M. "Is Pyorrhea Curable, Doctor?"—Dr. Marvin M. Sugarman, Atlanta, Georgia

11:30 A.M. Questions and Answers

12:00 P.M. Table Clinics

1:00 P.M. Luncheon

2:00 P.M. Business Session

Treasurer's Report

Report on President's Address

Report of Committees

New Business

Place of Next Meeting

Installation of Officers

Adjournment

Fifth District Clinician



DR. SUGARMAN

Monday, September 22, 10:30 a.m.

MARVIN M. SUGARMAN
D.D.S., F.I.C.D.
Atlanta, Georgia

"IS PYORRHEA CURABLE, DOCTOR?"

A graduate of Atlanta Southern Dental College, Dr. Sugarman is now Assistant Professor in Periodontics at Emory University. He is a member of the American Academies of Periodontology, Oral Pathology and Dental Medicine. He is the author of many articles which have appeared in leading professional journals and is in constant demand as a lecturer at dental meetings throughout the country.

Table Clinics

MONDAY, SEPTEMBER 23, 12:00 noon

1. "General Anesthesia in Dental Office"—Dr. F. Durant Bell.
2. "Palliative Orthodontics"—Dr. W. L. Hand, Jr.

Dr. Donald L. Henson will also present a clinic. The title will be announced.

Dr. Austin to Head Legislative Committee

Dr. Edward U. Austin of Charlotte is the new chairman of the Legislative Committee. He was elected by members of the committee to succeed Dr. C. W. Sanders of Benson who has headed the committee for the past three years and asked to be relieved of the assignment.

Two other changes in committee assignments have occurred since the

August (Proceedings) issue of the JOURNAL went to press.

Dr. Stuart A. Barksdale of Charlotte will head the Children's Dental Health Week Committee. He was appointed to the post by President Moser after Dr. Donald L. Henson of Kinston resigned. Dr. Barksdale served as chairman of this committee last year.

Dr. L. H. Short of Charlotte, at his own request, has been relieved of his assignment to the Monitor Committee. No one has been named to replace him.

Editorials . . .

OUR COMMITTEE STRUCTURE NEEDS OVERHAULING

To many individuals sitting through the entire session of the House of Delegates, there is an immediate impression of duplication and overlapping of committee reports. Often the reaction is, "Is this committee still necessary? This has been a special committee for years, why is it not made a standing committee?"

The basic answer to this situation is that we are handicapped by a set of by-laws which does not adequately spell out the establishment, duties, number, and co-ordination of the various committees. Endless red tape, confusion, needless repetition, controversy and unnecessary expense is the result.

The N. C. D. S. has 18 standing committees and approximately 25 special committees, for a total of 43. Only one state has more committees than ours. The national average is 16 standing and 7 special committees, for a total of 23. The national median is 15 committees. It is obvious that we are "over blessed" with committees, and a little analyzing might be helpful. The committee structure of our Society should be so organized that any proposed program could be developed and implemented easily and quickly for the good of all members. To improve our committee structure and make it more efficient and more effective, a reduction in the number of committees is indicated.

It might be a good idea to call our standing committees "councils." Roughly speaking, a committee is an elected or appointed group to con-

duct business or study a situation. A council is also appointed or elected for the same purpose, but it is more or less permanent in nature. For example, our Ethics Committee could be called a "council," for only one new man is appointed to that committee each year. To insure a continuity from one administration to the next, the permanent committees might be called "councils," with members rotated the same as our present Ethics Committee. All councils could be composed of one or more members from each district, and each member appointed for a term of five years. Here are twelve suggested "councils":

1. Council on Ethics
2. Council on Legislation
3. Council on Prosthetic Dental Service
4. Council on Reference and Resolutions
5. Council on Insurance
6. Council on Relief Fund
7. Council on Annual Session
8. Council on Hospitals and Institutions
9. Council on Dental Health and Education
10. Council on Professional and Allied Groups
11. Council on Dental Service
12. Council on Dental Formulary

It is evident that all the activities of our society cannot be covered by standing committees or "councils," but that it may be necessary at times to have some special committees. However, special committees should deal only with unusual problems of a limited or temporary nature. The

Committee on Medicare might easily qualify as a special committee, for it is dealing with a thorny issue that will not always be with us, we hope.

It might help strengthen our committee structure by employing sub-committees. The work of the Executive Committee, for example, might be strengthened by having the immediate past president serve on that committee for a term of one year immediately upon his retirement. The Budget Committee could then become a sub-committee of the Executive Committee, with the immediate past president serving as chairman. The retiring president and the secretary-treasurer, because of their experience, certainly should possess maximum know-how when it comes to finances.

The Constitution and By-Laws Committee could also be made a sub-committee of the Executive Committee. Problems are constantly arising that require either interpretation or clarification of the provisions of our Constitution and By-Laws. Presently, if a change in our Constitution and By-Laws is indicated, the chairman of that committee is called in, the problem is explained, and that chairman then calls a meeting of his committee. The committee finally submits its report to either the Executive Committee or the House of Delegates. There is much lost motion here. Of course, care should be taken not to empower the Executive Committee with too much authority; but with proper checks and counter-checks (such as the House of Delegates and the Reference Committee) this pitfall is easy to avoid.

Of the twelve councils listed above, the first six are familiar and

their duties are fairly well outlined in our Constitution and By-Laws. However, the other six need some elaboration. Here is a proposed skeleton outline.

Council on Annual Session

The Chairman could act as the convention co-ordinator and delegate the duties as follows:

A. Chairman of Clinics. (One committee could acquire clinics, superintend clinics and censor them.)

B. Chairman of Entertainment. (One committee could handle entertainment of out-of-state visitors, and convention entertainment.)

C. Exhibits Chairman. This person would mainly supervise exhibits at the convention and perhaps assist the executive secretary in acquiring exhibits.

D. Chairman on Golf and Skeet-Shoot.

E. Chairman on Housing.

F. Chairman on Necrology.

G. Chairman of Program.

H. Chairman on Press Relations (new).

I. Monitor Chairman.

Council on Hospitals and Institutions

The State Institutions Committee and the Hospital Dental Service Committee have much in common and their duties might be combined.

Council on Dental Health and Education

The following committees could be combined, for their objectives now overlap to some degree:

Council on Dental Health and Information, Extension Course Committee, Rural Health Affairs Com-

mittee, State-Wide Study Club (?), Children's Dental Health Week.

Council on Professional Allied Groups

None of the following committees are burdened with work at present, and if at any time any issue should arise on any Council, a special sub-committee could be appointed to deal with that particular problem, and report to the main committee. Two new duties might be incorporated under this heading.

Liaison Committee to the Old North State Dental Society.

Liaison to Dental Hygienists.

Liaison to the North Carolina Medical Society (new).

Liaison to the Dental Assistants.

Liaison to the North Carolina Dental Auxiliary (new).

Council on Dental Service

The work of the following committees is very important, for it has to do with dental fees. As time goes on, this may be one of the most important councils we have. Here it may work to excellent advantage so the left hand may know what the right is doing.

Advisory Committee for V.A. Program, Industrial Commission, Dental Service Corporation, School Health Co-ordinating Service.

Council on Dental Formulary

With such an excellent start this year, this field of dentistry should be continued.

A Committee Manual

This analysis of our committee structure is superficial, and is far from complete, for many committees have not been touched upon. Perhaps some day a representative com-

mittee might be appointed to really study this problem. It will not be easy, for after the committee structure is completely overhauled, our by-laws will have to be changed and carefully worded so that the duties of the committees are definite, meaningful, and clearly designated, without undue limitations that might restrict the imaginative mind. The job will not be completely finished until a manual is printed for all committees stating their duties, how they should operate, and how the report is to be submitted. When this is finished we will have taken a long stride up the ladder of progress.

C. C. DIERCKS

A.D.A.A. Conducting Membership Campaign

The active assistance of all dentists is being sought in the membership campaign now being conducted on a nation-wide basis by the American Dental Assistants Association.

The A.D.A.A. has set a goal of 15,000 members by the time of its annual convention which will be held simultaneously with that of the American Dental Association in Dallas, Nov. 10 to 13. This will be an increase of nearly 100 per cent.

A plea that each member of the A.D.A.A. request his dental assistant to give serious consideration to joining the A.D.A.A. has been voiced by Dr. W. R. Alstadt, A.D.A. president.

As a means of stimulating additional interest in the membership campaign, the A.D.A.A. has announced plans for a number of "Welcome Awards" which will be presented to new members and their sponsors at the A.D.A.A. convention in Dallas next fall.

The Truth About General Roberts

Or

"There's No Rule Like An Old Rule"

By

BILL B. HOWARD, B.S.B.

Executive Secretary

Texas Dental Association

The purposes of Parliamentary Procedure are to guarantee:

1. Justice for all
2. Courtesy for all
3. One thing at a time
4. Rule of a majority
5. Rights of minority.

Chairmen and members of a meeting who keep these rules in mind and abide by them can do no wrong.

In a well conducted meeting, there is no time for personality clashes, pettiness or hard feelings. The chairman can and should call out of order anyone violating the five basic rules above during a meeting of any body of persons, from a small bridge club to the United States Senate. But, one of the reasons for the -extreme longevity of gavels is that they aren't used often enough.

Some of the basic problems and snags in conduct of most meetings lie in the lack of knowledge of *General Robert's Rules of Order* and in

proper procedure. We have attempted to give a layman's views of the various problems with which we have become aware. They are not a panacea. Instead, further study and a desire to attain some semblance of perfection are necessary before the knowledge essential to a well conducted meeting can be acquired. This is an attempt to divulge enough matter to inspire that study and desire.

One of the most offensive sounds to a trained parliamentarian is to hear someone say, "I make a motion" . . . he should always say, "I move." "I make a motion," or "he made a motion" (the latter usually written in minutes) is never correct.

Personal opinions in minutes of meetings should never be recorded by the secretary unless they are approved by the body convening. In other words, to say that Dr. Blank gave "an outstanding" talk on a "very interesting" subject, is merely voicing the opinion of the secretary. It may not be the opinion of the

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EXAMPLES OF MOTIONS CORRECTLY AND ECONOMICALLY STATED

ORDER OF MOTIONS

Second Required	Debatable	Amendable	Vote to Carry	
Fix time to which to adjourn.....	+	(-)	M	I move we adjourn to reassemble at six o'clock.
Adjourn - Recess.....	+	-	M	I move we adjourn.
Question of Privilege.....	-	-	(M)	I rise to a question of personal privilege.
Orders of the Day.....	-	-	1/3	I move the orders of the day.

PRIVILEGED

Table	+	-	M	I move to table the motion.
Previous Question.....	+	-	2/3	I move the previous question, namely the main motion.
Postpone to Set Time.....	+	(+)	M	I move to postpone the consideration of this motion until our November meeting.
Refer to Committee.....	+	(+)	M	I move we refer this matter to a committee.
Amend Amendment.....	+	-	M	I move to amend the amendment by striking out the word "seven" and inserting the word "three."
Amend Motion.....	+	+	M	I move to amend the motion by striking out the word "ten" and inserting the word "seven."
Postpone Indefinitely	+	-	M	I move we postpone this motion indefinitely.

SUBSIDIARY

Main Motion.....	+	+	M	I move we employ ten assistants immediately.
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MAIN

Code
+ applies
- does not apply
M majority
() symbol within parentheses usually applies,
but with certain limitations

"Failure to state motions properly is the greatest single source of confusion in meetings."

majority present and, incidentally, it does not make the minutes any more legal and involves unnecessary writing. The secretary is a recorder of transactions, not a reporter or interpreter of sentiment.

A cardinal rule to be remembered is that a motion is not before the house until it has been seconded and repeated by the chair. If several people speak up at the same time with various motions, first of all they are out of order, but, if the chair does not call them out of order and wants to place one of the motions before the house, he states that motion and the fact that it has been seconded. Then and only then can the motion be considered before the house. Discussion is then called for if it is a main or subsidiary motion.

If an unpopular motion is before the house the quickest way to dispose of it is to move that it be postponed indefinitely. Proper phraseology being, "I move we postpone this motion indefinitely." This, contrary to popular opinion, is more effective than tabling a motion since a tabled motion may be taken up immediately following the next order of business unless otherwise specified. An indefinitely postponed motion is, for all practical purposes, lost forever, if the motion to postpone carries.

When a motion to amend and a motion to amend the amendment are before the house and perhaps someone suggests referring it to a committee, then someone says, "I move we postpone this motion to a set time," the quickest way to get an immediate vote is to call for the Previous Question, whether it be the main motion, one of the amendments or any other subsidiary motion. A second is required for the

previous question but it cannot be debated or discussed nor can it be amended. A two-thirds majority vote is required for the previous question and it acts as a call for an immediate vote.

Motions with some merit can be handled differently. An amendment to a Main motion and an amendment to the amendment are in order. Other motions, such as refer to a committee, postpone to a set time, adjourn, etc., can be introduced to temporarily halt action on a pending motion. And, too, it is sometimes necessary to amend to refine the wording of a motion.

When some member calls "Question" from the floor, he is not acting in Parliamentary form at all, and, should be ignored. If he calls for the "Previous Question" he not only shows his knowledge of *Robert's Rules*, but he is much more courteous as well as correct.

In the event a meeting is called for the purpose of approving a budget (or any other type business but which calls for a special meeting) and the members present start discussing unrelated subjects, it is then pertinent to move the "Orders of the Day." This puts the meeting back into its original channel for which it was called and does not require a second, it cannot be debated or amended and only one-third minority plus one is necessary to vote in favor. This is primarily designed to protect the rights of the minority.

The accompanying chart shows the order of precedence of motions and shows how to introduce them on the floor. It shows whether a motion should have a second, whether it is debatable, needs a majority or

(See GENERAL ROBERTS, page 46)

Periodontal Consideration

L. FRANKLIN BUMGARDNER, D.D.S.

Charlotte, N. C.

Not enough specialists in periodontics practice in the entire United States to care properly for the periodontal disease that exists in San Francisco alone.

From this fact we must assume that 90 per cent of the periodontal therapy administered to the American public is primarily the responsibility and concern of the general practitioner. More than anyone else, the family dentist is responsible for the success or failure of all dental procedures since there is no phase of dental practice that does not involve consideration and preservation of the supporting tissues—the periodontium.

Today, like yesterday, more than half of all the teeth that are lost, are lost as a result of periodontal disease. This does not take into account the irreparable damage inflicted upon the patient from the standpoint of alveolar bone resorption, damage to other body organs and in general the health of the patient while the disease is in progress. It has been estimated that perhaps four out of every five people have evidence of periodontal disease in some form. To say it another way, 95 per cent of the people over the age of 45 have evidence of the disease.

In a very recent article, Dr. Sam Parks said, “the diagnosis and treatment of periodontal disease is a challenge to the dental profession. This

challenge must, and can, be met by the practitioners of dentistry. It is the dentist's duty to see that the tragic loss of the teeth because of periodontal disease does not occur. The knowledge and equipment to meet these responsibilities are at hand. With care and study the problem can be solved.”¹ Glickman points out that, “periodontal care is a comprehensive approach toward the maintenance of the health of ALL the periodontal tissues, in relation to ALL the teeth of ALL patients.”²

Rational Approach

It is true that the major responsibility of the supporting structures of the teeth rests upon the shoulders of the general practitioner, then the need for proper training at the undergraduate and postgraduate levels would seem a logical step in the right direction. A rational approach to the periodontal problem basically is an understanding of the underlying tissue changes, not based simply upon experience and observation, but fabricated in accordance with facts and logical deduction. If we should study the supporting structures of the teeth, their changes and their preservation in health, it would require a knowledge of oral bacteriology, histopathology, physiology, metabolism and periodontology. We must first be able to recognize the normal tissue, its color, form and density and then apply our concepts of prevention. This means early detection and recognition of any deviation from the normal be-

Clinical Instructor in Periodontology and Oral Pathology, University of North Carolina School of Dentistry. Presented before the Tennessee First District Dental Society September 4, 1957, Johnson City, Tenn. Reprinted from the *Journal of the Tennessee State Dental Association*, January 1958, with minor revision by the author.

havior pattern of the tissues. The earlier these changes are observed and corrected, the easier and more gratifying are the results.

Procedure and Interpretation

It is the accepted belief that the establishment of the etiology is the criterion of success. The etiology may be established upon the findings from two general sources, local and systemic or perhaps both. Since the systemic background of the patient is of such vital importance in complete periodontal therapy, a careful history record must be taken. Oral and radiographic examination with the aid of study models. After the case has been carefully charted and studied, interpret the findings and make a diagnosis. The normal mucosa and gingiva present a characteristic clinical picture. Pink, stippled and firm in appearance. The color, stippling and firmness is variable in different individuals and in different areas of the same mouth, depending upon the usage employed. The color is more variable, stippling and firmness more constant. Histologically, the mucosa is a layer of stratified squamous epithelium, upon a layer of fibrous lamina propria which in turn is bound to the bone and muscle. The clinical appearance of the papillae are pointed, the free margin of the gingiva is smooth and thinly contoured containing a shallow sulcus. The attached gingiva is firm and stippled.

Ordinarily when a patient presents to your office this is not the case, but they are in need of treatment. After complete examination has been made and diagnosis established, a definite and well organized treatment procedure plan should be followed. Since the bacteria play

such an important role, first consideration must be given to the oral hygiene and patients' general health. Emergency measures include immediate extraction of abscessed teeth and the surgical dressing pack applied for reduction of gingival inflammation. Prophylactic measures and home care instructions, followed by the corrective and restorative procedures. Finally, the maintenance phase. It has been hypothesized that 75 per cent of the success of periodontal treatment is dependent upon proper maintenance.

Lesions

A brief summary of the classification of lesions according to Orban and Wentz. (For complete classification refer to: *Atlas of Clinical Pathology of the Oral Mucous Membrane*: Mosby 1955.)

- | | | |
|--------------------|---|--------------------------------------|
| White Lesions: | { | Leukoplakia |
| Hyperkeratosis | | Lichen Planus |
| | | Others |
| Ulcerative Lesions | { | Herpetic Gingivostomatitis |
| | | Recurrent Aphthous Ulcers |
| | | Chemical Burns |
| | | Ulcerative Stomatitis |
| | | a. Necrotizing ulcerative gingivitis |
| | | b. Chronic desquamative gingivitis |
| | | Decubital Ulcers |
| Bullous Lesions | { | Allergy |
| | | Others |

Hyperkeratotic lesions of the oral mucosa may affect the epithelium or the connective tissue. It is generally classified as *simplex* and *complex*. Hyperkeratosis complex may be considered pre-cancerous.³ Hunter's statistics show that about one out of every eight hundred people has leukoplakia in some form. Seventy-five per cent of the cases appear in males 50 to 60 years of age.

The lesions are milky - white patches in the simplex form, and the gray-white plaques in the complex

type. When the grey-white plaques form approaches malignancy ulceration may occur.

The etiology has not been definitely established. Aside from the idiopathic type, it is thought to be caused from repeated physical injuries. Tobacco seems to be one of the most prevalent chemical irritations to the mucosa. Cheek biting and other physical injuries are thought to encourage increased epithelial keratinization, poliferation



Fig. 1. Leukoplakia. History of using snuff.

and inflammatory infiltration of the tissue involved.

Therapy indicated is the elimination of the local and systemic factors producing the irritation. Vitamin and radiation therapy have been used. A biopsy must be made when in doubt.

Lichen Planus, a relatively harmless inflammatory disease, found usually at friction points on the mucosa. The pearl gray streaks that radiate have been termed Wickham's striae. The disease usually remains in a chronic dormant stage with alter-

nating periods of improvement. It is excited by worry and exhaustion of the individual.



Fig. 2. Lichen Planus 15 years duration, right cheek. Onset began with body rash which responded to bismuth injections. Lesions vary according to nervous tension of patient.

The etiology is not clear, but the presence of increased lymphocytic infiltration and the absence of plasma cells are of diagnostic value. It can generally be assumed to be psychosomatic in origin, and initi-



Fig. 3. Lichen Planus involving attached gingiva. Female, age 67 a widow and nurse. Culture from lesion produced yeast and staphylococcus albus.

ated by worry and exhaustion. Therapy is rest. Bismuth has been effective.

Ulcerative Lesions

Erythema Multiforme, a common skin disorder, difficult to differen-

tiate from herpes virus infection and pemphigus. This is due to viral-like nature of the disease from the clinical standpoint. However, it can be differentiated by the absence of viral organisms and the presence of



Fig. 4. Erythema Multiforme. Female age 12. Duration 30 days. Temperature 105°. Culture produced green streptococcus, non-hemolytic staphylococcus and a few diplococcus. Note external ulcers with scab formation.

streptococcus, staphylococcus and other forms of bacteria (fig. 4), and from pemphigus by the presence of a greater amount of skin edema and

on the lips, face, legs, hands, and sometimes other areas of the body.

The term *Multiforme* implies that many forms of erythema have been recognized. To a great extent they are named according to their clinical appearance. Vesicles and Bullae more often affect the mouth and are termed, *Erythema Vesiculosum* and *Erythema Bullosum*. The papular skin lesions are termed *Erythema Papulatum*.

Specific etiology has not been established but contributing factors suggests infection, allergy and nutritional imbalance.

Therapy does not require the use of drugs. Effective results may be obtained by the administration of *Antihistamines* (12-25 mg tablets over a three day period) and *Multi-vitamins*, particularly vitamins B and C. A maintenance dose of vitamins should be continued for 30 days.

Herpetic Gingivostomatitis is an acute infectious disease, characterized by excessive inflammation of



Same as Fig. 4, showing ulcer on finger, which also occurred on legs and face. Completed case following two weeks hospitalization and treatment.

inflammation. Duration, high temperature, general malaise, sore throat and the infrequent appearance of intraoral lesions are all of diagnostic clinical significance. Red, irregular skin lesions appear most frequently

erythema and edema of the lips, mucosa, tongue, and gingivitis. The disease is caused by herpes simplex virus, occurring in persons of any age, but most often and most severe in children under 6 years old. It is

highly infectious and may be transmitted from one individual to another. Those who are not affected

the first few days, and may remain enlarged following the healing of the ulcer. The usual course of the disease



Fig. 5. Herpetic Gingivostomatitis. Female age 9. Duration one week. Inflammatory enlargement of gingiva, ulcerative and hemorrhagic. Completed case after 30 days.

have never been exposed or have built up an immunity.

Isolated virus from the lesions have been shown to produce neutralizing antibodies, which may also be found in the serum of convalescent patients. Immune bodies in the blood, as a result of the infection, have been demonstrated by Scott, Steigman and Convey.⁴ Intranuclear inclusion bodies found in the peripheral cells of the vesicle, by Tzanc test, is positive diagnosis. Because of the marked difference between the signs and symptoms of the initial infection and the secondary or recurrent infection, the disease is divided into two phases, primary and secondary.

In the primary stage oval vesicles appear singly or in groups. The vesicles rupture within a few hours leaving small ulcers bordered by a red halo. The patient is usually fretful, refusing to eat and often losing weight. A ropy saliva is characteristic in most cases. High temperature is common. Enlargement of the cervical lymph glands occur during

is one to two weeks but in uncontrolled cases lymphadenitis interferes with deglutition necessitating forced feeding and hospitalization.

Herpetic lesions that involve the lips, face or extremities are covered with a black, scab-like, crusty layer. The scab will disappear in two or three days. Aphthous lesions are usually present in the commissures of the mouth. The disease occurs during or immediately following respiratory infections, such as, colds, hay fever, pneumonia, influenza, meningitis and other fevers.

Due to the presence of a pseudo-membrane the disease is often confused with necrotizing ulcerative gingivitis, but there is one important factor for differential observation. When the pseudo-membrane is removed from the herpetic lesion a yellowish base appears, while in the necrotic lesion the base will always be ulcerative. In herpetic cases the tongue will show desquamation of the epithelium, inflamed papilla (papillitis) and heavily coated surface.

The lack of uniformity in therapy

may be an indication for better differential diagnosis. Therapy consists of prophylactic measures, vitamin supplements and in some cases smallpox vaccine or gamma globulin has been used. Other therapy employed by the writer with excellent results have been topical applications of Gentian Violet 1 per cent. Wet compresses and lanolin for the lips. Internally, Antihistamine — 15 mg tabs — 1 every 4 hours while awake, for three or four days and in addition Vitamin B with C, 1 a day for two weeks or longer if needed.

Secondary or recurrent aphthous



Fig. 6. Secondary or Recurrent Aphthous Ulcers. Note punched-out lesion lower right.

ulcers are inflammatory punched-out lesions appearing in the vestibule, floor of the mouth, tongue and the mucosa. The ulcer is covered with a yellowish white slough, recurring at intervals and apparently unrelated to the herpes simplex virus infection. Histologically the changes which have been recorded are essentially those of chronic inflammation. The interdental papillae are swollen and may be classified as inflammatory hyperplasia. While this condition may be excited by poor oral hygiene, orthodontic treatment tends to en-



Fig. 7. Chemical burns from aspirin.

courage the formation of hyperplasia which may have been unobserved or even absent up to that time. One of the most likely predisposing factors are the hormones since it is not uncommon to observe these lesions during adolescence, pregnancy and menstrual periods.

Therapy indicated is oral hygiene, cauterization with silver nitrate, anesthetic troches, 2.5 per cent Cortone Acetate topically and Aureomycin internally. In extreme cases repeated intradermal vaccination with cowpox vaccine. Gonadotrophic hormones contained in the anterior pituitary gland extract has been used.

Chemical Burns appear in the form of a white patch or ulceration.



Fig. 8A. Clinical aspect of periodontal pockets as incubation zones.

If an aspirin tablet is allowed to remain in contact with the mucosa the acid produces necrosis. Accidental burns occur from other acids, phenol, silver nitrate, etc. Palliative therapy consist of an anesthetic mouth wash, benzocaine lozenges or

tory tissue changes are caused by bacteria. If this is true, then more consideration should be given bacteria. The fusiform and spirochetes have been described as symbiotic. That is, the harmonious association of two dissimilar and unrelated or-



Fig. 8. Necrotizing ulcerative gingivitis showing periodontal pockets as incubation zones.

2.5 per cent Cortone Acetate applied topically.

Ulcerative Stomatitis most often occurs as a necrotizing ulcerative gingivitis or Vincent's infection. The gingiva is characterized by punched-out ulcers, sloughing papillae and the presence of a pseudo-membrane. The papillary and marginal gingiva are involved in the acute cases with ulcers that are hyperemic, edematous and painful. Necrosis is peculiar to this disease with acute and chronic areas often present in the same mouth. From the standpoint of clinical manifestations all inflamma-

ganisms to their mutual advantage. *Fusiformis dentium* bacillus and *borrelia vincentii* spirochete are the two most important bacteria found in the presence of necrotizing ulcerative gingivitis.

Most all cases of necrotizing ulcerative gingivitis have a good background of periodontal disease. Local and systemic predisposing factors cause lowered tissue resistance, and while the tissues are in this lowered state of resistance exacerbation of the disease occurs, rather than being communicated from one individual to another. Local factors that tend

to encourage its attack is poor oral hygiene. The presence of calculus and poor dentistry play an important role. Box has pointed out that incu-

gingiva. The disease begins with the papillary, layer of the gingival connective tissue.⁵ The clinical appearance of the gingiva is smooth

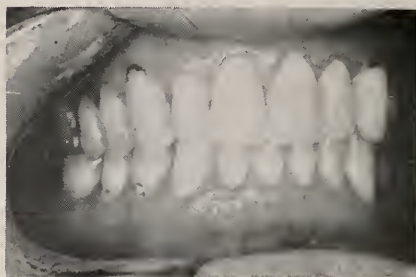
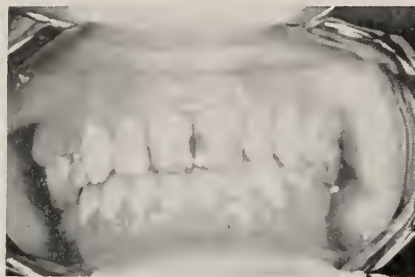


Fig. 9. Chronic desquamative gingivitis. Woman left, Man right.

bation zones found around erupting teeth and partially erupting third molars, traumatic injuries and periodontal pockets contribute to the role of chronic necrotizing ulcerative gingivitis or may well be considered the starting point.

The infection may effectively be eliminated by the use of drugs, but will surely recur if all incubation zones and other predisposing factors are not removed. Therapy should be systematic and thorough:

1. Administration of penicillin in acute cases.
2. Apply surgical packs for gingival inflammation.
3. Second day remove gross calculus.
4. Homecare instructions and other hygiene measures.
5. Complete set of radiographs.
6. Eliminate all incubation zones. (Restorations.)
7. Correct occlusal trauma (very important).
8. Maintenance.

Chronic desquamative gingivitis (gingivosis) is a degenerative disease affecting the connective tissue of the papillary, marginal and attached

and fiery-red with blister-like eruptions as watery blebs. The blebs rupture leaving a reddened ulcerative area of exposed connective tissue. The epithelial layer may slip-off by the use of slight pressure or blast of air. The disease occurs more often in women but is occasionally observed in men over 45. Sex hormones have some association with the disturbance as well as other metabolic considerations, especially in the

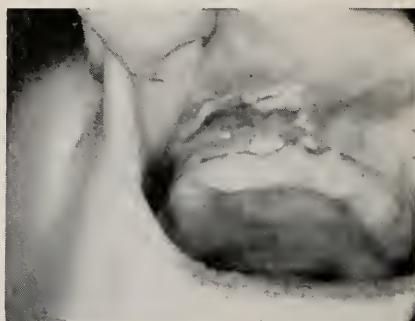


Fig. 10. Decubital ulcer. Note deep trough-like groove in mucobuccal fold.

younger age group with non-menopausal or hysterectomy history.

Histopathologic finding made by Engel, Ray and Orban, show that

very profound tissue changes occur in the connective tissue ground substance. They contend that the connective tissue consists of a number of components, such as cells, fibers, extracellular fluids and a cementing ground substance which lies between and surrounding the fibers and the cells. The extracellular component of the ground substance is largely a carbohydrate protein complex or glyco-protein. It is organized as a polymer well knitted together. The absence of the basement membrane and ground substance accounts for the stripping-off of the epithelium.

Therapy indicated is local applications or injections of estrogenic hormones. Antibiotics reduce secondary infections.

Decubital Ulcers, sometimes referred to as denture sore mouth, are characterized by ulcerative lesions of varying size. Occasionally the lesion will extend the entire length of the labial and buccal mucosa along the flanges of the denture. The borders of the lesion have the clinical appearance of inflammatory hyperplasia surrounding a deepened trough-like groove. Inflammatory connective tissue may be exposed at the base of the lesion beneath a pseudo-membrane. A biopsy is advocated in cases of long duration and constant irritation.

Denture adjustment is mandatory. Adjunctive aids are the aniline dyes applied topically and large doses of Vitamin C for several months.

Bullous Lesions

Allergic reactions of the body are classified into two general types:

1. Localized or contact allergy.
2. Generalized, drug and protein food allergy.

The substances most likely re-

sponsible for specific allergy sensitivity are, cosmetics, new dentures, drugs and foreign proteins. Bacterial protein act as an antigen producing



Fig. 11. Contact allergy.

a lesion in a local area or a generalized stomatitis. When observed clinically the lesion is red, edematous and may be followed by vesiculation at the site of contact. The vesicles in some cases produce bullae, found about the tongue, and result in necrosis.

Therapy is removal of the sensitizing agent.

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The good work you talk about doing has no existence. Only what you actually do will be accepted by the world as evidence.

GENERAL ROBERTS

(Continued from page 36)

plurality and the most economical way of stating a motion. This chart was based on *Roberts Rules of Order* and designed by Professor J. D. Hoover, Oklahoma City University speech department head.

Other suggested armamentaria are *Parliamentary Law at a Glance* by E. C. Utter, and *Sturgis Standard Code of Parliamentary Procedure*. It should go without saying that *Roberts Rules of Order* is basic and a prerequisite.

We have attempted to briefly

touch on some of the problems in conducting a meeting. Since there are more than 40 motions in the three major types, this article is merely to alert the readers to the possibilities of leading a group along legal lines in a meeting. It serves to prove that there is a challenge and to meet it requires study. We hope that our reader's interest is not adjourned with this article, merely postponed to a set time.

I don't think there is anything more fun than being an alert citizen.

—Anna Lord Strauss

News From UNC School of Dentistry

Fifth Dental Class Graduated

Forty-six senior dental students were hooded and ten second-year hygienist students received their Caps and Pins at the Fifth Honors Day Convocation June 2, 1958. Dr. Zeno L. Edwards of Washington, N. C., delivered the principal address to the graduates. Dr. Clifford M. Sturdevant gave the Invocation and Dean John C. Brauer welcomed the parents, wives, families and friends of the graduating class.

Faculty Resignations

Dr. Claude R. Baker resigned from the faculty June 30, 1958.

Dr. Owen R. McKenzie resigned June 30, 1958, to go into full-time practice in Burlington.

New Members

Dr. Cecil Lupton joined the staff of the Department of Oral Surgery as an instructor April 1, 1958.

Five members of this year's graduating class are joining the faculty as Instructors. They are: Dr. Walter T.

McFall, Jr., Department of Oral Pathology and Periodontology; Dr. Bennie D. Barker, Dr. Matthew T. Wood, and Dr. Charles A. Reap, Department of Prosthodontics; and Dr. William C. Jarvis, Department of Oral Diagnosis and Treatment Planning.

Leave of Absence

Dr. Clifton E. Crandell, Department of Oral Diagnosis and Treatment Planning, has been granted a leave of absence for the academic year 1958-59 to pursue graduate work in Roentgenology at the University of Pennsylvania School of Dentistry.

Promotions

Dr. Monte Miska was made acting Head of the Department of Crown and Bridge Prosthodontics on April 1, 1958.

Dr. Frank H. Daniels has been named Assistant Professor in the Department of Pedodontics effective September 1, 1958.

MID-WINTER ISSUE

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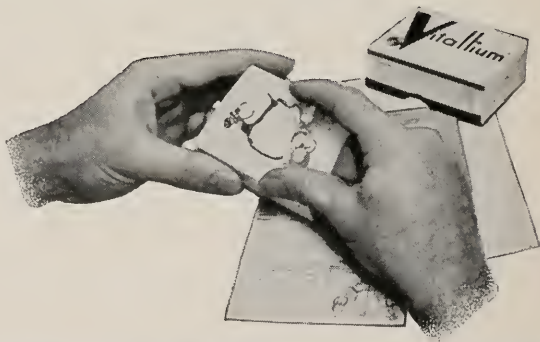
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JANUARY, 1959

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The Journal of the North Carolina Dental Society
Sincerely Dedicates This Issue to



G. FRED HALE, D.D.S. F.A.C.D.
Raleigh, North Carolina

From 1930 to 1937 Fred served as the first Editor-Publisher of the *Bulletin of the North Carolina Dental Society*, which later became THE JOURNAL OF THE NORTH CAROLINA DENTAL SOCIETY. He was President of the Fourth District Dental Society in 1931-32 and President of the North Carolina Dental Society in 1938-39.

He was born in Bertie County, attended Buie's Creek Academy, was graduated with honors from the Medical College of Virginia in 1924 and later completed graduate work in Orthodontics at the University of Pennsylvania. During World War I he served in the U. S. Army in the Coast Artillery, attaining the rank of Captain.

He is a past president of the Raleigh Rotary Club and always has given generously of his time and talents to make his community a better place in which to live.

The dental profession has gratefully bestowed many more honors on Fred, and deservedly so. In his quiet, unassuming and friendly way, he devotedly pursues his chosen profession, and his daily life expresses eloquently his love for his fellow man.



DR. MOSER

The President's Page



It was my good fortune to attend all five District Meetings this past fall. It was a revealing experience and I want to proclaim to the members of the five districts that I am grateful for that experience. I think all the meetings were outstanding. The attendance was exceptionally good and many attendance records broken. The weather was perfect (we missed Helene in Wilmington by one week), and the officers and local arrangement committees had made the most careful preparations.

The scientific papers and clinics presented were of the highest order and the members present were obviously intensely interested in them as exhibited by the many questions and the broad scope of these questions. Also, the table clinics presented at the district level were outstanding. We have a wealth of young men in this state who show great promise as clinicians of exceptional ability. Let us encourage and develop them further for even greater recognition and achievement.

The publicity we received from these meetings was excellent. Why shouldn't it be? Such meetings make an important contribution to the life

of a community in which these meetings are held.

The State Officers were particularly impressed by the fine caliber of men inducted into membership in each of the districts. These well-trained men realize and appreciate the fact that "only through organized dentistry can so much be had for so little." Let's extend the cordial hand of fellowship to these new members at our meeting in Pinehurst next May.

The five District Societies are great institutions. They are the very backbone of the North Carolina Dental Society. It is not always possible for every member to attend state or national meetings, but it should actually be possible for every member to attend district meetings. We believe that if you attend your district meetings with any degree of regularity, you will then want to attend the state and national meetings as well.

I would be remiss if I did not thank the districts for the many courtesies extended the State Officers at the meetings this fall. You all were wonderful to us and we sincerely appreciate it.

I also attended the ADA meet-

See **PRESIDENT**, page 92



DR. SHERROD

The President-Elect Speaks



As Chairman of the Membership Committee and on behalf of the entire membership, I want to extend a cordial welcome to the new members who joined our ranks at the district meetings this past fall. Sixty-six dentists were inducted by the five districts. Three more have been accepted for membership since those fall meetings under a provision in the By-Laws which permits new members to be accepted between annual meetings. This revision was adopted by all Districts except the Second. That makes a grand total of sixty-nine additions to the District rosters. Of this number ten were transfers from one District to another. Consequently the net gain for the State at-large is fifty-nine newcomers.

We are glad to have you all among us. We know that in the months to come we can count on you to add to the prestige and effectiveness of the Society by your participation in some of its activities. We have many things to do and we need you.

We want everyone to know each of you better and greet you personally at the very first opportunity. Therefore, I am taking this means

of introducing all of you and commending you to the membership.

W. B. SHERROD, D.D.S.
Winston-Salem, N. C.
November, 1958

NOTE: If a man is a transfer from another district, the number in parenthesis beside his name indicates the district from which he transferred. Reinstated members are indicated by (R).

NEW MEMBERS IN THE FIRST DISTRICT

Clarence W. Canrobert, Conover
Fay H. Culbreth, Forest City
William A. Current, (USN) Norfolk, Va.

Edwin B. Davis, Jr., (USN)
Jacksonville

Leland V. Grady, Asheville (2)

Charlie H. Harrill, Lincolnton

James A. Maddox, Asheville

Carl R. Munday, Asheville

Perry M. Noblitt, (USAF) San Antonio, Texas

Lorenzo T. Russell, Asheville
(R)

Curley G. Walker, Asheville

NEW MEMBERS IN THE SECOND DISTRICT

Bernard D. Agress, Winston-Salem

Samuel P. Ausband, Winston-Salem

Harry N. Baldwin, North Wilkesboro (4)

Andrew J. Franklin, Denton

Frank R. Graham, Charlotte

Robert C. Gray, Mooresville

John S. Hood, Lexington

John J. Jordan, Charlotte

John S. Long, Winston-Salem

William H. McLeod, Monroe

Guy McD. Phillips, Winston-Salem

John R. Spencer, Salisbury

James G. Strupe, Winston-Salem

Douglas M. Young, Winston-Salem

Walter T. McFall, Jr., Chapel Hill

Saunders W. Moore, Burlington
Galen W. Quinn, Durham

Charles A. Reap, Jr., Chapel Hill

Baxter B. Sapp, Jr., Durham (4)

Charles G. Strange, Jr., (USN)
Quantico, Va.

James L. Williams, Pittsboro

Matthew T. Wood, Chapel Hill

NEW MEMBERS IN THE FOURTH DISTRICT

Jack Bennett, (USA) Arlington, Va.

R. M. Blackman, Selma (R)

William M. Heeden, Jr., Benson

Jerry O'D. Jernigan, Dunn

James H. Lehmann, Sanford

Malcom McAllister, Raleigh

M. F. Smith, Rowland

NEW MEMBERS IN THE THIRD DISTRICT

John L. Andrews, Jr., High Point

John W. Atwater, Jr., Asheboro

Bennie D. Barker, Chapel Hill

Frederick M. Chandler, Roxboro

Richard J. Citrini, Durham

I. C. Clark, Mebane

Ernest E. Easley, Burlington

William W. Ellis, Mayodan

Thomas E. Evans, Jr., Burlington

Richard M. Fields, Greensboro

William L. Haltiwanger, Jr.,
Rockingham

William C. Jarvis, High Point

Bennie McB. Johnston, Graham

John R. Lore, Greensboro

Cecil R. Lupton, Chapel Hill (5)

NEW MEMBERS IN THE FIFTH DISTRICT

Edward G. Boyette, Ahoskie (4)

Lewis P. Bratton, New Bern

Henry D. Browning, III, Wilson

Walter E. Campbell, Rocky
Mount

Badger G. Clark, Jr. (4)

James E. Etheridge, Wilson (4)

Julian H. Fisher, Rocky Mount

John R. Jacoway, Ayden (4)

Edwin S. Jewell, Wilmington

H. Leonidas Keith, Jr., Wilming-
ton

Walter S. Linville, Jr., (4)

Walter S. O'Berry, Edenton

Raymond C. Whitehurst, Jr.,
Wilson

G. Curtis Wilson, Wilson (4)



DR. BUTLER



From the Secretary's Desk

The only way we can command respect is to deserve it. Without being egotistical, it behooves us to be self confident. In order to be self-confident, we must know that the best scientific knowledge is at our command. The degree of interest, the time and effort devoted to any task determines its success.

It should be a basic desire within the heart of every member to co-operate with the North Carolina Dental Society in formulating plans through the local Societies in the presentation of scientific programs that would enable every one to attend and derive the benefits of the best known dentistry. *This is one plan and one way the Society can help every member.* Is this not our one great object? It should be!

A new and better day will have dawned for us when the public will consider it a disgraceful neglect to lose a tooth without putting forth every effort to retain this important part of the body. Many times I have used the expression, "that I

would rather give a year's work than lose one single tooth."

Organized dentistry should present a program to educate the public to utilize all the health services of the dental profession. This is a big program which will require real leadership, hard work, and donation of time.

The days slip by so quickly and the world progresses at such a pace that we will be left far behind unless we keep up with the changing world and are prepared to meet the challenge of tomorrow.

How much of our time are we willing to devote to the advancement of dentistry?

The program of every District this year has been outstanding, and it was a pleasure to see the enthusiasm manifested. *CONGRATULATIONS TO ALL!* It was a pleasure to be with you.

LUTHER H. BUTLER, D.D.S.
Greensboro, N.C.
November, 1958



Ernest A. Branch, D.D.S., J.A.C.D.

May 16, 1888 — December 3, 1958

As this JOURNAL goes to press, word has been received of the death of Dr. Ernest A. Branch, who for twenty-nine years served with distinction as Director of the Division of Oral Hygiene of the North Carolina State Board of Health.

There are so many things that could be said about Dr. Branch because he lived such a full life. His devotion to his work brought him wide recognition and many honors. Above all it brought him many friends, especially the countless school children who learned the first rudiments of dental health through the joyful capers of a bright-eyed puppet named "Little Jack."

This diminutive creature of Dr. Branch's fertile imagination, borne of deep love and concern for children, will live on and on in the hearts and minds of those children who were stirred by his colorful performances in schools throughout the State. And thus Dr. Branch will live on and on, beloved for many years to come. For the spirit of "Little Jack" is the embodiment of the thoughts and the teachings of Dr. Branch.

Editorials

YOUR JOURNAL POLICY

Beginning with this issue a new section has been added to the JOURNAL composed of news items from local dental societies. Although it is still far from complete, with time and co-operation it can eventually become a delightfully informative feature. Its success or failure rests squarely on the shoulders of each district editor. With the fine caliber of district editors we have this year, this new feature will probably achieve optimum popularity and usefulness quite shortly, however.

Encouraging able individuals to contribute scientific articles is a perplexing problem. All of us seem to be too deeply engrossed with daily problems to sit down and write our thoughts and ideas for print. There is not an individual reading this who has not thought, at one time or another, about writing on some phase of dentistry. Dr. Funderburk, in his article on hypnosis

that appears in this issue, had an idea. He schooled himself on the subject and then sat down and put his thoughts on paper. Many individuals will be enlightened by his article and will contribute more to dentistry because they read it. Undoubtedly, Dr. Funderburk is a better dentist, also, for having written it.

Brains, ability, and talent abound freely in our Society; but as long as they remain dormant, no one is helped. This latent talent must be encouraged so that we all will benefit.

Freedom of the press is an American tradition. If the Society so desires, your JOURNAL may introduce a "letter to the editor" section to give all an opportunity to express their likes and dislikes and to offer constructive criticism. We will endeavor to incorporate as many ideas as practical for a better JOURNAL.—C.C.D.

DENTAL CARE TOO HIGH?

The Charlotte Observer, like many other papers, bemoans the high cost of medical and dental care in an editorial on Sunday, September 21, 1958. The physician and dentist are favorite targets to barb as long as all members in the family are having no physical affliction. An emergency or definite need for either, suddenly changes the tune, however.

Probably most dentists and physicians will readily agree that dental

and medical bills are too high. They will quickly add that eggs, steak, butter, cars, refrigerators, etc., are too high, also. What we all must realize is that everything is relative. Dental and medical care is high, but by comparison with other commodities, our fees are pretty much in line. A prominent business magazine so stated this summer.

While many editors cry for the need of socialism in the fields of dentistry and medicine because of

high fees, we in our professions could probably comment unfavorably about the increased subscription rates of our newspapers. In times past, many a Sunday paper could be bought for a nickel. Now many are twenty cents. We in the dental and medical profession might say that all newspapers should be socialized because they are being

priced out of the reach of some of our patients.

Although a few of our dental and medical colleagues are undoubtedly out of reason with their fees and are encouraging socialism, most are human, as are our newspaper editors. We all know that socialism is not the answer, be it in the field of industry, law, medicine, or even journalism. — C.C.D.

School buildings and professional teachers are not needed by one who loves knowledge. Life itself is the greatest of all schools. The world is the finest of all teachers because of the variety of lesson it offers for study. The education we desire, we get. The ignorance that limits us is ignorance of our own choosing. To love wisdom is to make the effort necessary to acquire it.

Bad officials are elected by good citizens who do not vote.

—George Jean Nathan

Approximately 70 per cent of all dentists who are in the federal services are members of the ADA.

DISTRICT OFFICERS' CONFERENCE GREENSBORO, DEC. 6-7, 1958

Right—New officers elected, left to right: B. B. Sapp, Jr., Durham, Secretary; A. L. Poovey, Hickory, President; and W. H. Gray, Jr., Williamston, Vice President. Below: E. A. Pearson, Jr., of Raleigh, presiding at the Conference Banquet at Sedgfield Inn.



"Privileges Presume Many Obligations"

At the Second District meeting in Charlotte September 28-29, 1958, Dr. Robert A. George of Mount Airy inspired everyone present with his challenging message to new members. It is but one example of the excellent way in which all the districts this year charged the new members with their duties and responsibilities as members of organized dentistry. It is printed here because it presents serious food for thought, not only for the dentist embarking on his professional career, but for all members, young and old.

Gentlemen:

It is a real pleasure to have a part in welcoming you into membership in the Second District Dental Society. You are now able to enjoy the many advantages which organized dentistry has to offer, advantages which are too numerous for all of them to be mentioned tonight and which we all only too often take for granted. You are privileged to attend local, district, state and national meetings, to participate in these meetings, to hear able clinicians, to see table clinics and projected clinics and the like. You will also find that there is much to be learned from informal association with other members. Sometimes we learn more from informal discussions of common problems than we do in any other manner.

You are also able to enjoy the privilege of practicing dentistry, a profession which has reached a high level of esteem largely because its members have joined one another in organizations and elevated their profession through their own efforts. Men who have gone before us and many who are here tonight have labored long and tirelessly to share knowledge freely with their colleagues, to build schools, to regu-

late their profession, to inform the public concerning dental health and to do the many other tasks which have been necessary to make dentistry a profession founded on knowledge and practiced with the closest attention to high ethical values.

These privileges presume many obligations on your part. Much is expected of you. You must give of your time, your efforts, of yourselves to see that our Society continues to have high ideals and to achieve them. You must conduct your practices in such a manner as to do credit to the entire profession. You will be expected to attend meetings whenever you possibly can, to be ready and eager to accept responsibilities offered you by the Society, to always be students desirous of increasing your knowledge and skill and of sharing such increases with others; and above all you will be expected to live personal lives which will enable you to walk honorably and peacefully with God and man.

We welcome you. This Society always needs new members to share its tasks, to renew its life and to

See PRIVILEGES, page 92

Reports From

The DISTRICT PRESIDENTS

FIRST DISTRICT

H. D. FRONEBERGER, D.D.S.
Gastonia

The officers and members of the First District Society have been spending so much time discussing the wonderful time we had at our recent meeting at the Grove Park Inn in Asheville that we have had little time to make plans for our next meeting. Charlie Chandler and his fellow officers are to be congratulated for one of the most educational and enjoyable district meetings I have attended.

The plans for our next meeting have not yet begun to take shape. We will again return to the Grove Park Inn next fall where hospitality is "King."

It is very gratifying to note that more and more of the wives are attending these district meetings,

making a more active and useful auxiliary.

I am sure that with the support of my fellow officers, Auburn L. Poovey, President-Elect, Max W. Carpenter, Vice-President, Allen T. Lockwood, Secretary - Treasurer, M. M. Forbes, Editor, and with a host of excellent committee material



SCENES FROM THE 1958 DISTRICT MEETINGS

Here are some shots of the First District Meeting at Grove Park Inn, Greensboro, October 4, 5 and 6. From top to bottom—(1) The new officers are all smiles as they begin their duties. Left to right: M. M. Forbes, Editor; M. W. Carpenter, Vice President; A. T. Lockwood, Secretary-Treasurer; A. L. Poovey, President-Elect; and H. D. Froneberger, President. (2) The table clinics were popular, especially this one presented by Don Gerdes. (3) NCDS President Everett Moser (right) presents a check for \$1,000 to Dean John C. Brauer (center) for the Dental Foundation of North Carolina, Inc. District President Charlie Chandler (left) looks on. The money was a gift of Robert J. Gurney of Gastonia and New York City.





we will have a successful year. We are all looking forward to meeting with other district officers at the District Officers' Conference in Greensboro.

SECOND DISTRICT

J. P. REECE, D.D.S.
Concord



The 38th annual session of the Second District Dental Society is history. Now we are entering upon a new year — one that I hope will be a good one for our Society. By the time this goes to press, our committees will have been appointed and many of them beginning to function.

As many of you may recall, at our recent meeting in Charlotte our new Editor-Publisher, Dr. Diercks, told us that he is endeavoring to get more news coverage for the JOURNAL about the individual Dentist and his family, and the local Societies. He is compiling a list of the local groups within our district in order that he may better accomplish this. As your President, I heartily endorse this endeavor of the Editor-Publisher and urge each of you to co-operate with him. If you have



SCENES FROM THE 1958 DISTRICT MEETINGS

The Second District gathered in Charlotte, September 28 and 29 for its 38th annual meeting. Pictured here from top to bottom are—(1) Officers for the coming year: (left to right) H. C. Harrelson, Jr., Vice President; W. F. Yelton, President-Elect; J. P. Reece, President; and J. A. Harrell, Secretary-Treasurer. (2) Dean C. Couch and interested spectators at his table clinic on "Post Operative Surgical Care." (3) Ed Austin presenting golf awards with J. C. Heinz, District President Tom Nisbet and Auxiliary President Mrs. Tom Thorpe. (4) Robert George charging the new members.



a snapshot or an item of news about yourself or a fellow-practitioner, send it to Dr. Clarence F. Bid-dix, our Second District Editor. We have a good man in Clarence Bid-dix, so let's use him this year. His address is 225 North Torrence St., Charlotte, N. C. It's good to be able to share the joys and sorrows of our colleagues, and thereby get to know and appreciate them a little better.

The North Carolina Dental So-ciety, under the leadership of Dr. Moser, has inaugurated a project this year that is most worthy. I refer to the campaign for the forma-tion of Study Clubs over the State. Dr. J. B. Freedland of Charlotte heads up a committee at the State level, whose function it is to lead in the formation of these clubs. Any local society or smaller group in our district who is interested in organiz-ing such a club should contact Dr. Freedland. He can lend valuable assistance. A committee to aid in this will also be appointed at the district level.

Your Second District officers, on December 6 and 7, attended the an-nual District Officers' Conference held at Sedgfield Inn, Greens-boro. Each officer was thoroughly schooled in his duties, and an in-teresting and extremely helpful fea-

ture was the panel discussion on the planning of the "Ideal District Meeting." Surely the holding of these conferences is one of the most forward steps our State Society has taken in some years. The benefits derived are reflected in the caliber of the District Meetings now being held.

The 1959 meeting of the Second District will again be held in the city of Charlotte, with the exact date soon to be selected.

See you in Pinehurst in May!

THIRD DISTRICT

W. K. GRIFFIN, D.D.S.
Durham

As an overall plan for the current year, I have the following points I would like to stress:

- (1) Emphasis on better partici-pation, co-operation, and attendance at our district meeting;
- (2) Encourage all eligible den-

SCENES FROM THE 1958 DISTRICT MEETINGS

The Third District convened at Mid Pines Club in Southern Pines, October 19 and 20. Above: The newly elected officers. Standing, left to right—J. R. Wheless, Vice President; W. P. Hinson, Jr., Secretary-Treasurer; and Guy R. Willis, President-Elect; seated is W. K. Griffin, President. Below: S. T. Hart, J. E. Roberts, J. W. Atwater, Jr., and J. W. Menius look over one of the table clinics.



tists to join our district, state, and national society;

(3) Provide the type of program for our district meeting that will be educational, informative, and entertaining to all in attendance;

(4) Encourage several study clubs to be started in our district;

(5) Emphasize the importance of good public relations.

I would like to challenge all eligible dentists to attend our meetings and be sure to join our Society, thereby becoming a contributor to, as well as a recipient of, organized dentistry. Now, and in the future, we need good members and all dentists need organized dentistry more than ever. Today in our country we need to represent and to be represented in order to be a progressive profession or we will be swallowed up and controlled by politicians and demagogues. I would like for all members to consider it their privilege and duty not only to attend our meetings but to offer any constructive criticism that will help us plan better meetings.

Study Clubs would help any small group because accomplishments can be attained at this level that could not be attained on a higher level. Any of us who are members of a study club realize the numerous benefits and feel that more of these groups should be formed in our district.

Good public relations is of prime importance in our profession and the best place to start this is "at the chair" by rendering high caliber service to each patient. We must remember our professional obligation to the public and fulfill it to the extent that they want our service as we practice today, without political interference.

Our district will participate wholeheartedly in the National Children's Dental Health Week in February, as we always do. We are fortunate to have in our district some of the strongest advocates of Children's Dentistry in our nation and the world. Let us remember that the children of today will be the parents of tomorrow.

By the time this JOURNAL goes to press, our new district officers will have attended the District Officers' Conference and committees will be functioning to plan our fall meeting. See you there!

FOURTH DISTRICT

E. A. PEARSON, JR., D.D.S.
Raleigh

The officers and committee chairmen of the Fourth District Dental Society who have been entrusted with the administrative affairs of our Society for this year, are humbly grateful to the membership for this honor and trust. The committee members are already working toward our annual session for the fall of 1959. Each of the committees concerned with the planning and preparation of our annual session is making every effort to bring to our membership the best in a scientific and clinical program. The entertainment will be outstanding for our members and guests.

Today, the speed at which scientific progress is being made is only short of miraculous. We must not, however, lose sight of our past and of those who have made lasting contributions to our profession. The race is not always won by the swift or the strong. With modern techniques and improved practices there

are remaining areas which need attention. To look in retrospect for a moment may perhaps give a clearer view for our immediate future.

At about the turn of the century the focus was on prevention of dental ills and diseases. This is evidenced by the fact that the dentists in our state were making contributions to dental education, with emphasis directed toward the young, and, particularly, the school age child. To quote one of Dr. Ernest Branch's favorite sayings, "Education is repeating today what we learned yesterday with the hope that it will become a habit tomorrow." Our emphasis today, more than ever, is directed to education with the hope of preventing dental defects and diseases. Why do we continue to emphasize this? Merely because we have experienced what can be done through proper educational methods. The dentists today are profiting by what was learned in the past. People are aware of dental health.

There is no state in the United States doing more in the field of dental education of the lay public than North Carolina through the efforts of the Division of Oral Hygiene and of the general practitioners. This program would not be in existence now if our predecessors in the dental and medical professions had not felt the need for such a program. Our state has been fortunate to have leaders in the past who saw the need for such a program and then found the greatest person of our time to head up this work. He was our own Dr. Ernest A. Branch. No one realized more than he that all the work in educating the lay public has not been the re-



SCENES FROM THE 1958 DISTRICT MEETINGS

The Sir Walter Hotel in Raleigh was the site of the Fourth District Meeting, September 22 and 23. In the top picture are the new officers: (left to right) E. A. Pearson, Jr., President; J. A. Marshburn, Vice President; J. B. Powell, President-Elect; C. P. Osborne, Jr., Secretary-Treasurer; L. D. Her-ring, Editor; W. H. Branch and M. T. Jones, Jr., Delegates. In the bottom picture Colin P. Osborne, Jr., of Lumberton explains a handy gadget for the office at his Table Clinic.

sult of any one person or program, but also of many hundreds of dental practitioners who take a few minutes with each patient to explain the basic fundamentals of good dental health.

Today, we have at our disposal many more tools with which to work designed for a specific job. These tools are not always shiny and peculiar in shape. As the years pass, more and more men are specializing in children's dentistry. Not many

years ago we often heard the majority of the practitioners of dentistry say about the child, "He is unmanageable, and after all they are just baby teeth so why bother with them."

There is a greater need for dental health education for the lay public than ever before. Our birth rate is increasing each year, and people are living longer. With these two positive factors the sum total means more people to receive dental care. The dental profession and individual practitioners obligated themselves to render dental service to all our people when they received their dental degrees. Dental manpower and ancillary help are not being trained and educated as fast as our population is increasing. This inevitably leads us often to a defeatist attitude. We must utilize our dental manpower to its fullest capacity, and through education reduce the incidence of dental caries and associated dental and systemic diseases. Can this be done? Yes, with the scientific proof that controlled fluoridation will reduce dental decay by at least 60 per cent and with the undisputed scientific proof of the benefits resulting from the reduction or elimination of free sugar from the diet, we can see very clearly that, within the near future we can adequately meet the dental needs of our population and, at the same time, have a healthier people. To accomplish this will necessitate each dental practitioner's devoting a part of his time to educating the patient, as well as, the continued support by the profession of the Division of Oral Hygiene in its task of educating children of school and pre-school age

in the appreciation of good dental health.

We are living in a day when many factors of primary importance relating to health, yes, even survival, are of utmost importance to each of us. I will mention only two of these factors. Radiation and air pollution are, of course, the concern of every one. A committee will be appointed during this year to study and make recommendations to our Society as to the best ways in which the dental profession may aid in the protection of our people. The fast changes being made in individual and family lives have created a national, yes, a world-wide problem, namely, mental health. Each of us will be able to make contributions to improve the mental health of our patients both in the dental office and at home.

Our future is bright. Our past has been filled with experiences which have enabled us to see the future — not through rose colored glasses but realistically. Our responsibilities increase with time. All of us are anxious and willing to assume our just and right shares of these responsibilities. If we do not, then our view of the future will be dimmed and obscured. If we do not meet the need, someone will.

FIFTH DISTRICT

CHARLES S. COOKE, D.D.S.
Wilson

The Fifth District had its annual meeting at Wrightsville Beach, September 21-22. It was a splendid meeting with good attendance. On behalf of the Executive Board I wish to thank the Wilmington den-

tists and their wives for all they did to make us feel at home.

I should like to extend a warm welcome to the following new members: Drs. Raymond C. Whitehurst, Jr., of Wilson, Walter S. Linville, Jr., of Wilson, Badger Gill Clark, Jr., of Greenville, Julian H. Fisher of Rocky Mount, James Earl Etheridge of Wilson, Edwin Smith Jewell of Wilmington, John R. Jacobway of Ayden, Walter Edward Campbell of Rocky Mount, Lewis Palmer Bratton of Raleigh, Walter Samuel O'Berry of Edenton, Edward G. Boyette of Ahoskie, G. Curtis Wilson of Wilson, Henry Donald Browning, III, of Wilson, and H. Leonidas Keith, Jr., of Wilmington. We need your active participation and we hope that our meetings will be meaningful to you as you begin work in the profession.

Again this year a special committee has been appointed for the purpose of educating the public during National Children's Health Week. This committee will organize the local dentists in the various communities to talk to civic groups, schools, and PTA's. Television and radio facilities will be utilized in the same way. All local dental societies are urged to participate during this most important week.

Dr. Roy A. Miller of New Bern, our editor, has asked that the dentists channel items for publication in the JOURNAL through him. Dr. Charles P. Godwin of Rocky Mount, Chairman of Necrology, will appreciate it if the local societies will inform him of any deaths which occur.

I want the Fifth District to know that I am beginning my year as your president with gratitude for the confidence which you have placed



SCENES FROM THE 1958 DISTRICT MEETINGS

The Fifth District took advantage of one of North Carolina's popular beach resorts and met at Wrightsville Beach, September 21 and 22. Top: New officers for 1958-59 are (left to right): C. S. Cooke, President; R. B. Barden, Secretary-Treasurer; W. H. Gray, President-Elect; and R. A. Miller, Editor. Middle: Eleven of the fourteen new members pose for the cameraman. Bottom: Dr. Sandy Marks (center), dental missionary to the Belgian Congo, talks over his experiences with NCDS officials, Executive Secretary A. M. Cunningham and Secretary-Treasurer Luther H. Butler.

in me, with a sense of humility, and an awareness of the responsibilities of this position. I shall give to this office my very best. I hope that the dentists in our district will not hesitate to give us any suggestions they might have as to how the officers can best serve, and that you all will help us as we try to make our 1959 meeting a rewarding one.

THE PRESIDENT

Continued from page 77

ing in Dallas. According to the Dallas newspapers, except for Rotary International, this was the largest convention Dallas had ever entertained. I am glad to report that there were 40 odd members of the North Carolina Dental Society present.

I spent eight hours or more in the hearings of the Reference Committee on Federal Dental Services, which this year tackled the highly controversial Medicare Program. It was very obvious that dentists from all parts of the country have never been enthusiastic about the government's efforts to provide medical and dental care to dependents of its employees. These dentists realize that it is just another attempt to further socialize dentistry and medicine in this country, where the system of free enterprise has made it the greatest country on earth. I went to this meeting pre-disposed to write something good. Well, the good part is that the Joint Report on Medicare and Federal Dental Services was recommitted to the Councils concerned for further study.

The year is half over and I want to take this opportunity to thank my committee members and chair-

men for their fine spirit of co-operation and the diligence they are expending in carrying out their assignments. I am confident that their final reports next May will reflect that they have exerted every effort to further the cause of organized dentistry in this state.

I wish for all of you a very Merry Christmas. May good success and prosperity attend you in the New Year.

S. EVERETT MOSER, D.D.S.
Gastonia, N. C.

November 14, 1958

PRIVILEGES

Continued from page 84

give it new vigor and a new outlook. We feel that you need this Society and the fellowship it represents to show you the way.

Let us pray.

Our Father, we would ask thy blessing on these new members. Bless them and help them to be active, alert, and skillful as well as highly ethical dentists. Help us all, Father, as members of this Society to make our Society more of a force for good than it has ever been and to keep constantly before us the ideal of service to our fellowmen. Amen.

In the last 10 years more than 3,000,000 new businesses have been started. Last year the successes outnumbered the failures by 63,000. The net gain for ten years is over a million new businesses. Small businesses are important. Over 75 per cent of United States business establishments employ three or fewer persons. What big business can you name that didn't start as a small business?

Hypnosis In Dentistry

ERVIN M. FUNDERBURK, D.D.S.
Charlotte, N. C.

At the present time three professional groups are legitimately employing the phenomenon of hypnosis, namely:

1. Educational Psychologists
2. Medical Psychiatrists, Psychotherapists and Obstetricians.
3. Dentists.

Hypnosis is an important adjunct to the already existing techniques used in dentistry today, but it is not intended to be a substitute for drugs, medications and other remedies where they should be applied. Scientists and members of the medical and dental professions are constantly on the alert making every effort to discover new methods of alleviating pain and improving the health of mankind. Hypnotic experience is accumulating and experimentation still continues. This fact has enabled the men at the scientific research level to wrest the study and application of the hypnotic phenomenon from the occultist, the faker and mystic who have had a monopoly on its use since the advent of general anesthesia in the latter part of the nineteenth century.

Misconceptions

There are certain misconceptions about the subject extant in the minds of the lay public and uninformed practitioners of the healing arts, which can best be explained;

1. As having no scientific basis.
2. That only the feeble-minded, neurotic and the weak-willed can be hypnotized.

3. Practice and scientific research have proven that the higher the intelligence of the subject, the easier it is for them to respond to hypnosis. This is not surprising since hypnosis depends upon the co-operation and understanding of the subject. Everyone can be hypnotized to some extent, but with some whose power of concentration is not attune, a much longer period of time will be required.

4. The fear of the subject that he will not waken from a trance is another problem with which the hypnotists must contend.

5. False fear of domination.

In hypnosis there is no suspension of mental and bodily powers such as we experience in natural night-time sleep. In the hypnotic state the patient is fully conscious and able to co-operate in matters involving physical and mental activity. Obviously this would be impossible if the patient were unconscious. During sleeping periods there are changes in respiration, heart action, patellar reflex, brain waves, and the galvanic skin reflex. In hypnosis these reactions are the same as in the waking state. Hypnosis will not rob a person of his will power or diminish his self control; rather it tends to build up the patient's self-sufficiency and inner strength.

A Modern Science

Scientists and inventors in the years past have made it possible for

us to enjoy the modern conveniences and the way of life that we have today. Many of these things we are incapable of understanding but we accept them for what they can do to make life easier and more comfortable. Only in the past ten years has hypnosis been established on a scientific and non-mystical basis. This has brought about a new era in hypnosis and the pendulum of history is now swinging in the direction of its use and modern application. It is no longer shrouded by the veil of skepticism but it has now assumed its rightful place among the modern sciences. It has gone beyond the experimental phase and is being used by many doctors over the United States and the entire world. This is the age of scientific enlightenment, but the science of hypnosis has suffered because of mysticism, abuse, misuse and inadequate training and experience on the part of those who have employed its use.

There is no evidence of danger from the use of hypnosis when properly applied. However, improperly trained or unqualified individuals may bring discomfort to their subjects. People without professional training and with only a knowledge of hypnotic techniques (which are easy to learn) may attempt to become healers, counselors, psychiatrists, dietitians, etc. The dangers which may arise stem not from the use of hypnosis, but from its misuse at the hands of those unskilled and unqualified in the field. In cases of adverse results, the culpability then should be properly placed, not on the technique, but on its unqualified misusers.

Any means of influencing the imagination is capable of inducing

hypnosis when the subject is in a state of readiness. Any power which exists lies within the subject and the hypnotist, contrary to general belief, has no mysterious gift or hypnotic power whatsoever. The force used is the subject's own imagination. The hypnotist merely has the technical knowledge of how to use it. Professionally, his role is that of the teacher or guide who leads his subject into the hypnotic state. If the patient is unwilling or unable, he will not become hypnotized.

Hypnotizability and Intelligence

Hypnotizability is a function of normal individuals. Generally children under six, psychotics, and people of low grade intelligence make poor subjects. Although there is no correlation between intelligence and hypnotizability, experience indicates that the more intelligent, the more extroverted, and the more strong willed a patient is, the more likely he is to be a good subject. The patient can go into hypnosis if he follows the suggestions and instructions given him if he does so, there can be no failure; but if failure does result, it is due to his own resistance and not to the technique.

The patient may even be unaware he is in hypnosis for he will appear to be awake in every respect but will respond to suggestions when they are given by the operator. Tests may be made to prove to the patient that he is in hypnosis by making a challenge. The challenge may be that he will be unable to elevate his hand, or that he may be unable to open his eyes until ordered to do so. If the patient is unable to meet the challenge, he knows that he is in hypnosis, the

knowledge of which has a tendency to deepen the trance state. Bringing the patient out of hypnosis is very easy, in fact, sometimes patients will come out of hypnosis by themselves. The main purpose is to keep the patient in hypnosis until all operative work has been completed. Then the operator may ask the patient to awaken himself by opening his eyes in a minute or two or more, or by counting from one to five or ten. The patient will then awaken himself.

A Controlled Awareness

The hypnotic state is nothing more than controlled awareness of the subject. This may be brought on by one's self, or it may be influenced by someone else. We enter this state of awareness many times every day but do not recognize it as such. It may be simple relaxation while watching movies or TV, or perhaps when reading, and frequently while driving an automobile, causing highway hypnosis. In day dreaming or when we are experiencing something that absorbs all of our attention, our field of awareness is restricted to that particular experience for that duration of time and we may be unaware of anything outside of our actual thoughts or experience at that time. A person may injure himself during excitement and not know just when he did it, as his attention was elsewhere. In hypnosis, a pleasant state is substituted instead of fear and anxiety, and comfort instead of pain.

When the patient's awareness has been restricted sufficiently, the above conditions can be achieved. With one hundred per cent concentration, the subject is in deep hyp-

nosis and is susceptible to receive suggestions. Full concentration on the idea of anesthesia leaves no mind power over to take notice of painful stimuli. Soldiers, for instance, have been able to carry on in the excitement of battle without noticing even severe wounds. In every day life, people often notice cuts or abrasions and wonder how and when they got them. The subject is by no means helpless, however, for he can think, reason and even ignore commands; but it is customary for suggestions with which he is fundamentally in agreement to be accepted and acted upon, far more readily than they would be in the ordinary waking state.

Stages of Hypnosis

There are various stages of hypnotic depth. Information derived from averaging the results of over 10,000 cases by several recognized experimenters may be charted in the following susceptibility tables:

Per Cent Entering Each Stage		Per Cent of Total in Each Stage
5	Uninfluenced	5
95	Hypnoidal	10
85	Light Stage	25
60	Medium Stage	35
25	Deep Stage	25

These stages have been arbitrarily catalogued. There is no sharp line of demarcation between them. With each of these stages there are demonstrable, various phenomena. The most dramatic of these which concerns the dentist is surgical anesthesia. People who are only very lightly induced at first can be trained to become good hypnotic subjects by repeated sessions.

The post hypnotic period is that

period or the lapse of time after the induction of hypnosis in which the patient responds to suggestions or ideas if he so chooses. This is to be carried out at a given time shortly after bringing the subject out of hypnosis, or it may be later in the day, or even days afterwards. In this way, the patient can be relieved of post-operative pain and annoying symptoms such as gagging, and the objections of wearing dentures or orthodontic appliances. This can be beneficial to the patient as he can be helped on a more permanent basis.

Dental Applications of Hypnosis

1. For the nervous, jittery, apprehensive patient.
2. For those who set up defenses to postpone actual work.
3. For the functional or psychosomatic gagger.
4. For the thumb sucker.
5. For the bruxism.
6. To aid in impression taking and bite registration.
7. For better control of hemorrhage and salivation.
8. For those who fail to follow instructions for oral hygiene, post surgical care and handling of dentures and orthodontic appliances.
9. For those who refuse anesthetic.
10. As a substitute for anesthetic in certain cases.

Hypnosis enables many people to relax and to gain poise and self mastery, and can have a very beneficial effect in strengthening a person's will. It is merely an increased capacity to follow suggestions made by the doctor. It is a form of relaxa-

tion during which it is possible to follow therapeutic suggestions more easily. The personality of the hypnotist and his ability to inspire faith and confidence is thus a determining factor. Hypnosis creates a pre-operative sedation in a trance and relaxation which raises the pain threshold. It eliminates fatigue and fears, which minimizes the quantity of a drug necessary for anesthesia or analgesia and lends itself to post operative anesthesia and amnesia for discomfort or pain.

Each patient reacts to hypnosis in his own unique way and when he is presented with a picture of his experience in his own terms, this facilitates induction process. One of the most frequent causes of resistance to hypnosis is a fluctuating attention. The tractability prevents a patient from concentrating on the doctor's suggestions. A proper motivation to be hypnotizable is essential before induction is possible. It is usually impossible to hypnotize a subject if he wills otherwise. The most frequent reason for failure is an inadequate or distorted motivation for hypnosis.

Unconscious Mind Patterns

Hypnosis is something you learn. A type of behavior to be learned, just as we have to learn to walk, and talk or to speak a language. The method of hypnotic induction is first mastered, then by application and experience we learn to use it properly. Hypnosis differs from physiological sleep just as much as it differs from ordinary awareness. It is primarily a learned type of behavior in which the persons become very receptive and responsive to ideas. One uses both the conscious and unconscious ways of

thinking. In your conscious thinking and behaving, you tend to orient all of your thinking and all of your understanding in terms of total environment. Your conscious thinking tends to be oriented around reality. In hypnosis, one deals with the unconscious mind, and with unconscious mind pattern ways of thinking and responding, as one can translate a reality stimulus into a new concept, a new idea or into a memory. You utilize those same capacities in hypnosis. You orient yourself to the realities that you need, and nothing more, and you utilize ideas, thoughts and memories and understanding.

Trance induction is one thing, trance maintenance is another and trance utilization is still another. Hypnosis is like inducing chemos-anesthesia and utilizing the trance is like the surgical operation. It is an entirely different procedure. One induces the trance state not because of any curative value in the trance state, but because it provides a better environment within the patient, a better psychosomatic environment within the patient, so that his ailments, whatever they may be, may be benefited more readily. It does not mean that you can hypnotize every body because you will fail on some, as you cannot establish good personal relationship with some people. Some people cannot establish good personal relationship with you. When you establish good personal relationship you can work best.

Another phenomenon is idiomotor activity, and idio-sensory activity. The definition of that is this — when you have an idea of a motor action you tend to put it into action, when you have an idea of

a sensory experience, you tend to experience it. In hypnosis you use all of the various abilities that every normal person possesses. The only way that hypnosis differs from the ordinary way of behavior is that you tend to consolidate into groups, certain types of behavior responses. We all have the ability to visualize. Some of our visualization is much more intensive than other visualizations. In hypnosis, you merely utilize those general tendencies and put them together in an orderly fashion, so that you can get a systematic manifestation of those things. As you have the ability go experience and learn things under hypnosis, even so most of us have the ability to forget things in the same manner. This brings on another phenomenon — that of regression, the capacity of a person to forget. This is good for nervous patients, and helps them to form amnesia for having dental work done. In the hypnotic state, distortion of time is very helpful, as a long operative procedure is shortened considerably in the mind of the patient. It may be shortened from one-third to one-half of the actual time used. The light and the medium trance is usually used in the main for doing dental work.

Not A Panacea

One of the disadvantages in the use of hypnosis is a patient's negativism. This is caused by misinformation derived from fiction and the activities of the stage performer. Some dentists have sought instruction in hypnosis from the stage hypnotist. It is generally agreed that such orientation may be to the disadvantage of the dentist in forming his own proper attitude to the

use of hypnosis in dentistry. We refer those interested in instruction to the post graduate and educational courses recognized by hypnodontic societies. Hypnosis should not be considered a panacea or a cure-all. It will not eliminate any other instruments or techniques necessary for good dentistry. It will not substitute for anesthesia in sufficient cases to eliminate chemical anesthesia from our armamentarium. However, it can serve as another instrument in our armamentarium, available when needed. With it we can make dentistry more comfortable for the patient and easier for ourselves. Hypnosis does not differ from any of our already employed dental procedures in the need for training and experience. We should understand its use and application so that we may "do all the good we can by all the means we can." The medical and dental colleges are now helping to place this phase of science to a practical use in its proper perspective as an aid in its relation to recognized medical and dental procedures.

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"Hypnosis is no longer one of the curiosities of science! It is a therapeutic resource of unquestionable value, which lies at the hands of every medical practitioner who is willing to take the trouble to enquire into its nature and the manner of its use."

CHRISTIAN A. HERTER, M.D.

The British Journal of Medical Hypnotism, Autumn 1958

* Cold Sores and Stress

The most ubiquitous of all virus infections of man is herpes simplex.¹ Almost the entire adult population has been infected, although this may not be apparent clinically. The disease has a notorious tendency to recur, and everyone, physician and patient alike, is familiar with it in the guise of "fever blisters," or "cold sores."

All patients with recurrent herpes simplex infections have specific (neutralizing) antibodies in their serums which apparently restrict the recurrent attack to a localized area on the skin but cannot prevent the recurrence per se. In fact, it appears that most adults harbor the virus at all times, and the infection is probably never eliminated.

A wide variety of factors have been said to activate the latent virus. Some are indicated in Table 1. The role of emotions — or stress — has long been considered by medical men. Clinical observations indicate that, in certain patients, attacks of herpes simplex have followed emotional upsets. Furthermore, the favorable response of some patients to various non-specific measures also indicates this possibility. Therefore, the role of

"stress" in the development of the "cold sore" was studied in the experimental animal and in the clinic with interesting results.

Stress and Susceptibility

Mice were stressed in a special cage.³ A buzzer and a light were turned on for five seconds; then an electric current was turned on over half the grid floor. The area getting the current (i.e. shock) was alternated. Within a few days these stressed animals learned to avoid the shock 50 to 80 per cent of the time by jumping over a barrier to the safe side.

In addition to this avoidance-learning reaction mice were subjected to another stress — restraint — by being loosely wrapped for six hours daily in a fine-mesh copper screen. The animals were then inoculated by intraperitoneal injection

TABLE 1. Factors said to activate the latent virus of herpes simplex.^{1,2}

Upper respiratory infection
Fever (artificial or with infection)
Sunlight and sunburn
Gastro-intestinal upsets
Menstruation
Mechanical trauma
Eating certain foods (allergy?)
Emotional stress
exhaustion
nervous tension

* From *Physician's Bulletin* Number 6, August 15, 1958, issued by Eli Lilly and Company, Indianapolis 6, Indiana and reprinted by special permission of the publishers.

tion of diluted virus of herpes simplex. The dose was such that a fatal infection developed in 50 to 60 per cent of control animals within two weeks.

It was found that stress (either avoidance-learning or physical restraint) made the animals more susceptible to the infection. There was a higher death rate and a shorter survival time than in control animals treated exactly the same except for the stress.

Whether or not these experimental stressful situations are analogous to emotional or psychologic stress in man remains to be determined. In this respect, the findings of psychiatric studies in patients with herpes simplex are of considerable interest.

A Study in Man

Several years ago, Blank and Brody² reported their observations on ten patients with frequent recurrent attacks of herpes simplex. A consistent psychologic pattern was quickly demonstrated.

Most striking was the attitude of the patient of psychiatric referral. Whereas many patients manifest various degrees of resistance to the idea of psychiatric referral, nine of the ten patients welcomed it. Furthermore, they all expressed a wish to be "good" people who wanted to do right and avoid doing wrong. They were eager to please and gain the love of the therapist. In other words, they were passive, submissive, obedient, emotionally immature, and highly suggestible persons who over-reacted to small stimuli, i.e., "stress." As a matter of fact, in two patients a canceled appointment induced herpes simplex within twenty-four hours. Apparently it

produced feelings of rejection and, therefore, for them, "stress."

Brief psychiatric treatment was sufficient to control the herpes simplex when it was a manifestation of a personality conflict. It is important to appreciate that these patients had previously shown no response to usual forms of therapy and, in a sense, had served as their own controls.

Speculations

If one wished to speculate, one could postulate that the virus of herpes simplex is widely distributed in man. The virus is localized by antibodies but, in general, is not destroyed. Then, when a stressful situation occurs (be it the alarm induced in animals by the warning signs before an electric shock or feelings of rejection by dependent persons, etc.), "resistance" to the virus is suddenly lowered. (This may be mediated through the pituitary-adrenal axis, for increased corticoid activity is associated with increased "susceptibility" to some viruses.) Animals injected with the virus become more susceptible; patients develop a recurrence.

If this "concept" is true, it would be a logical step to consider such mechanisms in relation to other virus diseases. Perhaps therapy of the future will comprise equal parts of vaccine, antibiotics, and psychotherapy.

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The Dental Laboratory Situation

*R. FRED HUNT, D.D.S.

Rocky Mount

There exists today nearly 7,000 dental laboratories in the United States. A vast majority of these laboratories are ethically and legally operated. There are, however, a small minority of laboratories that are extremely unethical and illegal. Although they are in a minority, their illegal activities create a *MAJOR* problem for the dental profession. It is stated by Dr. C. A. Wilkie, Secretary of the Dental Society of the State of New York, that in the New York City area alone, a five million dollar yearly racket exists. The illegal technicians are doing complete work on dentures — (impression taking, etc.), by-passing licensed dentists, and endangering the health of patients. A similar situation exists in Chicago, Washington State, Idaho and other cities and states.

An Alarming Situation

Probably no phase of dentistry has given more cause for concern during the past few years than prosthodontics. On many occasions it has been said that dentists themselves are largely to blame for the alarming situation which exists today in this branch of dentistry. The members of our profession, I am

certain, do not realize what they are doing or they would immediately refrain from their detrimental actions.

While the ethical laboratory and the ethical technician are co-operative, their position often becomes most difficult, particularly when the dentist *REQUESTS* them to do what they know they should not do. If they refuse they are afraid they will lose a customer. It is known that some dentists send patients directly to the laboratory for repairs. What can they expect the patient to do next time? Cases have been reported where dentists have sent patients to laboratories for matching teeth, trying in partial dentures, or correcting impressions. Is it surprising that some technicians get ideas about practicing dentistry? Such acts undoubtedly are committed carelessly or with no thought of the future, and are confined to a small number of dentists. However, the effect is not lessened, because there exists evidence in abundance of the end results.

Legislative Efforts by Illegal Technicians

In several states during the last few years all-out efforts have been made by certain illegal technicians to obtain legislation permitting them to practice prosthetic dentistry directly for the public. Through various means they have secured considerable support among legislators. Likewise, court decisions have been

** Dr. Hunt is a past-president of the North Carolina Dental Society. He is currently serving his second term as a member of the ADA Council on Dental Trade and Laboratory Relations.*

rendered in their favor. I shall mention very briefly several such instances.

1. The Idaho Case. An illegal laboratory operator contested the legality of the Idaho Dental Practice Act. The Supreme Court in Idaho declared unconstitutional parts of the dental practice act. The practical result of this ruling is that the dental technicians are *NOW* allowed to advertise and work directly for the public in that state. The Idaho State Dental Association has rewritten the dental practice act and is now awaiting a decision by the Supreme Court to determine its constitutionality.

2. Public Denturist. A bill was introduced in the Illinois State Legislature by illegal laboratory operators in May, 1955, to create what was to be called "A Public Denturist." The bill was favorably reported out of committee by a vote of 16 to 6. It was defeated in the final processing before the Legislature adjourned. Only the vigorous and concerted action on the part of the Illinois and Chicago Dental Societies prevented this bill from becoming a law. Some \$120,000 in legal fees have been incurred by the two societies in fighting this type of legislation. This law would have allowed these illegal laboratories to advertise and deal directly with the public. Also, a sublevel type of dentistry would have been created.

3. Attempts to pass similar legislation in Washington State and Oregon have been defeated so far, but each new legislature sees similar bills being introduced. Eternal vigilance and large expenditures of money on the part of the dental

societies have been necessary to cope with this situation so far.

"It Can Happen Here"

Members of the profession in these areas now realize what can happen when some dentists are careless in their relationship with the dental laboratories. The dental profession in North Carolina has been very fortunate in that the operation of illegal laboratories has been kept to a minimum. We may be sure, though that if this illegal menace is not stamped out it will spread to other states, including our own.

It has been said that 99 per cent of legislative trouble in the dental field is initiated by the dentists themselves. Whether or not this statement is true makes little difference. The profession is faced *NOW* with a critical situation. Unless carelessness on the part of some dentists in their relationship with dental laboratories ceases, an even more serious situation in respect to legislation will be reached.

Six Rules for Dentists

It should be apparent to every member of the profession that a real and grave problem does exist. Each dentist may help by refraining from the following detrimental actions.

1. Having patients deal directly with the dental laboratory or dental technician in *ANY* manner.

2. Failing to supply the dental laboratory with "*complete written*" instructions.

3. Allowing laboratory technicians to *design* a case or select the materials to be used.

4. Requesting dental laboratory personnel to "*see*" a patient.

5. Referring patient to den-

See DENTAL LAB, page 111



“On the local level...”

Beginning with this issue, this section will be devoted exclusively to news from local dental societies. Items of interest on meetings, projects and activities of the local societies should be forwarded to your District Editor for publication in future issues of THE JOURNAL.

FIRST DISTRICT

M. M. FORBES, D.D.S., Editor

The Buncombe County Dental Society at its October meeting adopted a proposal of The Medical-Dental Credit Bureau for the establishment of a credit rating service for its members, including access by phone and mail to credit information on patients. John O. Oliver, sales representative for J. F. Jenlenko Co., presented a discussion of “Visual Aids and Patient Education.”

The responsibility of the dentist in “Early Detection and Treatment of Oral Cancer” was stressed by Dr. A. C. Riddle of Asheville in a talk before the society in November.

The Gaston County Dental Society heard Dr. W. W. Walker of Charlotte speak on “Simple Orthodontic Procedures for the General Practitioner” at its November meeting. The members were glad to welcome back Dr. E. W. Connell of Mount Holly following an extended absence due to an injury received in an automobile accident at Myrtle Beach on Labor Day. He reported that Mrs. Connell, also injured in the accident, is doing well.

The Isothermal Dental Society

elected the following officers at its November meeting at Cliffside: William F. McBrayer, Rutherfordton, President; Glenn McCall, President-Elect; F. H. Culbreth, Secretary-Treasurer; and R. G. Burris, Editor. Dr. J. B. Freedland of Charlotte presented a program on Endodontics at the meeting.

The Tri-County Dental Society

elected new officers when it met in December at Lincolnton. They are: Theron Sain, President; Frederick Shaw, Vice President; and D. G. Frye, Secretary-Treasurer. The program included a demonstration of the new Cavitron machine for cleaning teeth and guest speaker Graham Morrison, noted humorist and former Lincoln County farm agent.

SECOND DISTRICT

C. F. BIDDIX, D.D.S., Editor

The Cabarrus County Dental Society met at Cabarrus Country Club in November and heard three of its members offer “Timely Tips on Making Dental Practice More Enjoyable to the Patient at the Dentist.” Participating in the discussion

were Joe V. Davis, Jr., Marshall B. Corl and Charles E. Ridenhour.

The Charlotte Dental Society lined up an excellent array of essayists for its meetings this year. In October the group heard Dr. Joseph L. Bernier of the Armed Forces Institute of Pathology speak on "Some Problems Associated With the Diagnosis of Common Oral Lesions." Dr. John Ingle of the University of Washington discussed "Endodontics" at the November meeting. On January 12, Dr. Drexel A. Boyd of Indiana University is to present "Practical Application of High Speed." Colonel Robert B. Shira of Walter Reed Hospital is scheduled to give an all-day seminar on Oral Surgery, February 26.

The Forsyth County Dental Society featured Dr. Clarence L. Sockwell of UNC School of Dentistry at its November meeting. Dr. Sockwell's topic was "High Speed and Its Evaluation."

THIRD DISTRICT

B. B. SAPP, JR., D.D.S., Editor

The Alamance-Caswell Dental Society is completing its annual 6-year molar round up among second and fourth grade school children in cooperation with the Health Department. The program is designed to stress the importance of the 6-year molar as a permanent tooth for the benefit of the children and the parents.

New members welcomed at the October meeting included: Ernest E. Easley, Saunders W. Moore and T. E. Evans, Jr., all of Burlington, and Bennie McB. Johnston of Graham. The meeting featured

a movie on the use of Adrenosin produced and released by Massengill Co.

Dr. Albert Coble of Burlington was elected President of the Society for the coming year. Elected to serve with him are: W. G. McFarland, President-Elect; Ray McKenzie, Vice President; and Thomas R. Hinson, Secretary-Treasurer.

The Durham - Orange County Dental Society adopted "Operation Open Mouth" as its project for the year. Fifty members volunteered their services to man an all-day oral cancer detection clinic, October 10.

On December 20 the Society held a Christmas party and dance.

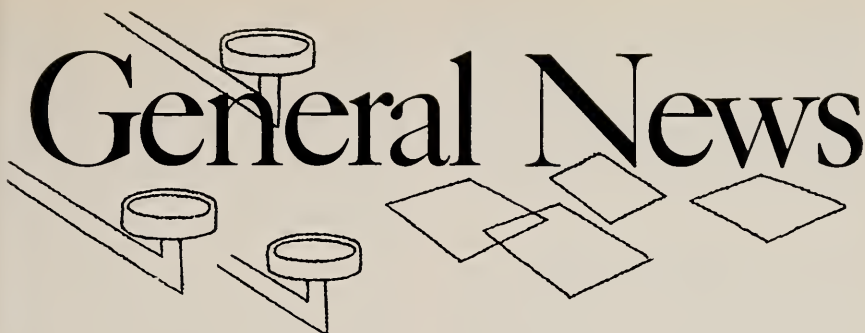
R. W. Sugg is acting President of the group following the resignation of Claude Baker. Other officers are: James A. Leggette, Jr., Secretary, and John S. Dilday, Treasurer.

The Guilford County Dental Society supported Greensboro civic organizations in their efforts to fluoridate the Gate City water supply once again, but the referendum was defeated in a general election, November 4.

In October Dr. Richard E. Richardson of UNC School of Dentistry addressed the Society on "Basic Responsibilities in Oral Diagnosis."

Dr. C. E. Patterson, Public Health Dentist of Guilford County Health Department, was guest speaker at the November meeting when election of officers for the coming year was held and Samuel T. Hart was named President. Also elected were: T. Edgar Sikes, Jr., President - Elect; William M. Ditto, Vice President; John D. Southworth, Secretary-

See LOCAL LEVEL, page 111



General News

NCDS President Endorses Scrap Amalgam Drive

Dr. S. E. Moser, President of the North Carolina Dental Society has called for all-out support of the annual Scrap Amalgam Drive, sponsored by the Auxiliary. Mrs. J. Walton Branham of Raleigh, heads the drive this year and she has announced a goal of \$2,000. All proceeds will be retained by the Relief Fund of The North Carolina Dental Society, Mrs. Branham emphasized.

In an open letter to the membership in the December *Newsletter* Dr. Moser said, "May I remind you that since the good ladies of the Auxiliary adopted this project some five years ago they have raised over \$8,000 — more than the Dental Society itself has contributed to this cause from its General Funds since the Relief Fund was started 30 years ago. This is a remarkable record and it is all the more reason why you should support the drive this year. Without their co-operation our Relief Fund would not be able to operate on a sound basis."

Attractive labels have been prepared by the Auxiliary to be used on novocain cans or other convenient containers and were dis-

tributed with the *Newsletter* in December.

Dental supply houses will co-operate with the Auxiliary in the collection of the scrap amalgam from dentists' offices all over the state during the week of March 9-14, 1959.

Children's Dental Health Week Set for February 8-14

National Children's Dental Health Week will be observed February 8-14, 1959. Dr. Stuart A. Barksdale of Charlotte, who is directing its promotion in North Carolina for the second consecutive year, has urged local societies to co-operate in the project which annually focuses public attention on the importance of proper care of children's teeth.

Professionally prepared press releases, radio and television scripts and posters are available for use in the campaign, Dr. Barksdale said. Local societies interested in receiving this material should contact him or any member of his committee, Dr. Barksdale added.

Serving with Dr. Barksdale on the Children's Dental Health Week Committee are: A. C. Current, Jr., Gastonia; C. W. Poindex-

ter, Greensboro; A. L. Poovey, Hickory; Charles A. Jarrett, Charlotte; M. E. Newton, Chapel Hill; J. C. Farthing, Winston - Salem; C. R. VanderVoort, Aberdeen; Nash Underwood, Wake Forest; and Henry O. Lineberger, Raleigh.

District Officers' Conference Holds Meeting in Greensboro

Forty district and state officers and their guests attended the Sixth Annual District Officers' Conference at Sedgfield Inn, Greensboro, December 6 and 7. Dr. E. A. Pearson, Jr., of Raleigh, President of the Conference, presided over the two-day meeting. Other officers of the Conference assisting Dr. Pearson were: Dr. J. P. Reece of Concord, Vice President, and Dr. A. L. Poovey of Hickory, Secretary.

The week-end program included: special training schools for district secretaries, editors and other executive officers; panel discussions on district society activities and projects; a Workshop on Ethics; and two business sessions.

Dr. S. Everett Moser of Gastonia, NCDS President and Dr. Luther H. Butler, NCDS Secretary-Treasurer spoke briefly to the group at a dinner meeting Saturday night. Dr. J. T. Lasley, Chairman of the State Relief Committee reported on the status of the NCDS Relief Fund and urged the district presidents to appoint Relief Committees to assist in the processing of applications for relief grants.

"Planning the Ideal District Meeting" was the title of a panel presentation by selected district officers at the general session Saturday evening. Panel members were: Drs. Pearson, J. P. Reece, J. A.

Harrell, W. F. Yelton, R. B. Barden, M. W. Carpenter, C. P. Osborne, Jr., and B. B. Sapp, Jr.

The Workshop on Ethics Sunday morning was moderated by Dr. H. K. Crotts of Winston-Salem in the absence of State Ethics Committee Chairman, Dr. G. L. Hooper of Dunn. Dr. Hooper was unable to be present because of a fractured leg received as a result of a recent mishap on the golf course. Dr. Crotts presented to the members of the Conference the first draft of the proposed adjunctive code of ethics for the state Society which has been prepared by the Ethics Committee. In its final form, the code will be presented to the House of Delegates next May for final approval.

Elected to succeed Dr. Pearson as President of the Conference next year was Dr. A. L. Poovey of Hickory. Other officers elected included: Dr. W. H. Gray, Jr., of Williamston, Vice President, and Dr. B. B. Sapp, Jr., of Durham, Secretary.

900 Persons Checked In Oral Cancer Exam

About 900 persons were examined in "Operation Open-Mouth," an oral cancer detection project staged simultaneously at UNC School of Dentistry, and Watts and Duke hospitals in Durham on October 10.

The project, first of its kind ever held on such wide scale in this state, was sponsored by the North Carolina Dental Society and the Durham-Orange County Dental Society in co-operation with the North Carolina Division of the American Cancer Society.

At Chapel Hill, Dr. Marvin R.

Evans, chairman of the NCDS Cancer Committee, said at least 400 persons came in for a free check-up. He said he could not estimate the number of mouth biopsies performed on questionable lesions in the mouth. He added, however, that from his point of view the project was successful.

Dr. Nicholas G. Georgiade, chairman of the Cancer Committee of the Durham-Orange County Dental Society, reported at least 500 showed up at Duke and Watts hospitals for checkups. About 25 per cent of those examined showed some problem related to the mouth, Dr. Georgiade estimated. He added that 10 to 15 biopsies were performed by the dentists working in Durham.

During the clinics, the dentists examined all areas of the mouth and any suspicious lesions were biopsied. The American Cancer Society plans to follow up all reports to make certain prompt treatment is requested by patient's suspected of having oral cancer. These cases were referred to the patient's family dentist or physician by the clinic.

Some fifty dentists in the Durham-Orange County area volunteered their services and manned the clinics from 11 a.m. to 7 p.m.

ADA Centennial Observance Set for '59 in New York

The Centennial Session of the American Dental Association will be held September 14-18, 1959 in New York City. Attendance at the five-day meeting is expected to range between 20,000 and 25,000, including some 2,000 international guests. President Eisenhower has been invited to address the meeting.

Simultaneous translation in English, French, German and Spanish will be used at the opening meeting, the general meeting and in portions of the scientific program.

A special preliminary program

CANDID SHOTS OF "OPERATION OPEN MOUTH"

Top: Dr. Norman F. Ross examines a pretty patient at Duke Hospital. Middle: Dr. Roger E. Sturdevant checks young David White of Pittsboro at UNC School of Dentistry. Bottom: Drs. E. R. Burns, Guy R. Willis, and N. G. Georgiade, relax during a lull in examinations at Watts Hospital.



will be published and sent to all ADA members about March.

The scientific program will be presented in the newly constructed New York Coliseum.

Housing applications and details on the social and scientific program will be published each month in *The Journal of the ADA*, beginning with the December 1958 issue.

Dr. Hooper Injured On Golf Course

Dr. Glenn L. Hooper of Dunn, Chairman of the State Ethics Committee, suffered a broken leg during the first week of December. He received the injury when the electrically-powered cart in which he was riding on the golf course overturned.

Dr. Hooper was to have conducted a Workshop on Ethics at the District Officers' Conference in Greensboro, December 7, but his accident prevented him from attending. Dr. H. K. Crotts of Winston-Salem and a member of the Ethics Committee substituted for him at the Workshop.

Dr. Hooper expects to return to his practice some time late in January.

Jeserich and Marks To Speak at Pinehurst

Dr. Paul H. Jeserich, President-Elect of the American Dental Association, and Dr. Sandy Marks, dental missionary to the Belgian Congo, have accepted invitations to speak at the 103rd Annual Session of the North Carolina Dental Society, May 3-6, 1959, at Pinehurst.

Dr. Marks is scheduled to speak at the General Session on Sunday

night, May 3. He and Mrs. Marks are currently home on a year's furlough and are residing at 1208 Rennie Ave., Richmond 27, Va.

Dr. Jeserich is Dean of the School of Dentistry, University of Michigan. He will speak at the General Session on Monday morning, May 4.

ADA Elects Thirteen North Carolínians to Life Membership

Thirteen members of the North Carolina Dental Society were elected to Life Membership in the American Dental Association by the House of Delegates at the 99th Annual Session, November 10-13 in Dallas, Texas.

To qualify, a member must have attained the age of 65 and he must have been a member in good standing for 35 years. The following North Carolínians were among the 750 members who received their life memberships: James P. Bingham, Lexington; Robert P. Casey, North Wilkesboro; Dean H. Crawford, Asheville; Roy B. Harrell, Elkin; James A. Marshburn, Butner; Wayne P. McGuire, Sylva; Darrell R. Pitts, Jamestown; Sye W. Poole and Edward R. Warren, Goldsboro; Thomas W. Smithson and Alvin P. Whitehead, Rocky Mount; William C. Taylor, Salisbury; and John F. Williamson, Wadesboro.

Seminar Attracts Large Crowd at UNC

There was "Standing Room Only" when Dr. Cecil H. Bliss of Sioux City, Iowa, one of the nation's leading authorities on dental practice administration, spoke on

DR. C. C. POINDEXTER (right) of Greensboro was re-elected President of the Dental Foundation of North Carolina, Inc., at its annual meeting in Chapel Hill, December 3. Serving with Dr. Poindexter for a second term are Dr. H. Royster Chamblee of Raleigh (left), Vice President, and Dr. John C. Brauer (center) of Chapel Hill, Secretary-Treasurer.



DR. SYDNEY ALEXANDER, assistant administrator, Division of Health Affairs of UNC, is shown speaking to the 250 guests at the Dental Foundation Luncheon, held in conjunction with the Fourth Annual Dental Seminar at UNC, December 3, 1958.



"A New Approach to the Problem of Case Presentation" at the Fourth Annual Dental Seminar held at the UNC School of Dentistry, December 3. Four hundred and forty dentists, more than a third of the membership of the North Carolina Dental Society, attended the one-day session which featured meetings of the Dental Foundation of North Carolina, Inc., and the UNC Dental Alumni Association.

UNC Dean John C. Brauer has announced that Dr. Bliss will be asked to join with the dental school faculty in a postgraduate course March 5-6, 1959. Full particulars on the course will be mailed to dentists shortly after the holidays, Dr. Brauer added.

Re-elected to serve another year as officers of the foundation were: Dr. C. C. Poindexter, Greensboro, President; Dr. H. Royster Chamblee, Raleigh, Vice President; and Dr. John C. Brauer, Chapel Hill, Secretary-Treasurer.

Dr. John W. Girard assumed office as president of the UNC Dental Alumni Association. Other officers include: Dr. John H. Dixon, Charlotte, President-Elect; Dr. Cecil R. Lupton, Chapel Hill, Vice President; and Dr. E. P. Williams, Charlotte, Secretary-Treasurer.

International College of Dentists Honor Dr. Butler

Dr. Luther H. Butler of Greensboro and Secretary-Treasurer of the North Carolina Dental Society for the past three years, was made a Fellow in the International College of Dentists at its annual meeting in Dallas during the 99th Annual Session of the ADA in November. Dr. Butler was one of 78 dentists in the United States so honored at a ceremony in the Adolphus Hotel in recognition of outstanding and meritorious service as members of the dental profession and for their contributions to the Arts and Sciences of Dentistry.

Dr. Hale Resigns From Medical Care Commission

Dr. G. Fred Hale of Raleigh submitted his resignation as a member

of the North Carolina Medical Care Commission to Governor Hodges on November 6 after twelve years of service as the Society's representative on that agency. His present term was to expire June 30, 1959. Dr. Hale asked that he be relieved of the assignment because of personal health considerations.

With the approval of the Executive Committee, Dr. S. E. Moser, President of the North Carolina Dental Society, has requested Governor Hodges to appoint Dr. H. Royster Chamblee of Raleigh to replace Dr. Hale as dental representative on the Commission.

Scientific Program for 1959 Meeting Announced

Dr. Thomas G. Nisbet of Charlotte, Chairman of the Program Committee, has announced that Drs. Stanley Harris of Chicago, S. Meigs Jones of Kansas City and Leroy W. Peterson of St. Louis will appear as the featured clinicians at the 103rd Annual Session in Pinehurst, May 3-6, 1959.

The program will also include four projected clinics this year by Drs. Clarence L. Sockwell and Robert H. Sager of UNC School of Dentistry, Dr. J. B. Freedland of Charlotte and Dr. Norman F. Ross of Durham.

Dr. Harris received his doctorate in Pharmacy and was highly acclaimed for his presentation at the Hinman Clinic last year in Atlanta. His topic will be "The Use and Abuse of Drugs in Dentistry."

Dr. Jones has appeared before most of the major dental meetings throughout the United States and will discuss "High Speed and Den-

tal Economics" a subject he has presented with much success on previous occasions.

Dr. Peterson is rated as one of the finest young oral surgeons in the country. He is a graduate of the University of Michigan and did post-graduate work at the Henry Ford Hospital in Detroit. He will present a paper on Oral Surgery, the title to be announced later.

The full program of the 1959 meeting will be carried in the April issue of THE JOURNAL.

Post Office to Issue ADA Centennial Stamp

The Post Office Department will issue a "dental health" postage stamp next year commemorating the 100th anniversary of the founding of the American Dental Association, it has been announced by Postmaster General Arthur B. Summerfield. The stamp will be issued in New York City on September 14, the opening day of the Centennial Session. The denomination, design and colors of the commemorative stamp have not yet been revealed.

Of approximately 2,000 requests received for issuance of commemorative stamps in 1959, only 19 were granted by the Post Office. More than a year ago, the ADA invited nine internationally known stamp artists to submit a design for the ADA commemorative stamp. The winning design, submitted by Willie M. Wind of Chicago, together with the designs chosen for second and third places were then submitted to the Post Office. Mr. Wind was awarded a prize of \$1,000.

Arrangements for ordering first day covers will be announced later.

DENTAL LAB

Continued from page 102

tal laboratory for "any" service whatsoever. (Unpardonable dental sin.)

6. Refusing to accept the "full" responsibility for personally treating the patient.

The Dentist Must Share the Responsibility

The majority of dental technicians are motivated by high ethical standards. The dentist and the dental technician co-operate in providing a health service for the public. The individual dentist, in his day-to-day relationship, should acknowledge this high-level ethical co-operation. If the individual dentist neglects these important considerations in his daily contacts and in his daily practice, he shares in the responsibility for weakening his professional status and the health service which his profession is dedicated to render for the public.

Rocky Mount, N. C.
December 6, 1958

LOCAL LEVEL

Continued from page 104

Treasurer; and James B. Howell, Editor.

FOURTH DISTRICT

L. D. HERRING, D.D.S., Editor

The Cumberland County Dental Society held its November meeting at Kay's Restuarant in Fayetteville. A VA film on "Re-section of the Mandible" including removal of malignant growth on the floor of the mouth was shown.

The Henderson Dental Society held its organizational meeting, De-

cember 4, and elected the following officers: J. G. Bennett, President; C. B. Taylor, Vice President; and W. F. Hargrove, Secretary-Treasurer. The group plans to hold dinner meetings quarterly and expects to adopt a constitution and by-laws at its next get-together, January 12.

The Rex Hospital Dental Staff in Raleigh met in November to hear Dr. Wilmer Betts talk on "The Correlation of Psychic Attitude of Patient to Dental Pain."

The Raleigh Dental Society at its November meeting considered a time payment plan for patients. Dr. E. U. Austin of Charlotte and a Charlotte bank official explained the system that has been in operation for some time in the Queen City. Representatives of Raleigh banks were invited to the meeting. A committee was appointed to work out the details for a plan which will be submitted to the Society for its approval at a future meeting.

E. D. Baker, chairman of the Fourth District Program Committee, is co-ordinating the 1959 District program with the Fifth District Program Chairman. The two districts customarily engage the same clinician.

A. A. Phillips of Raleigh presented a clinic at the Pan-American Dental Congress in Mexico City on Orthodontics demonstrating surgical treatment of a third class malocclusion.

FIFTH DISTRICT

ROY A. MILLER, D.D.S., Editor

The Craven County Dental Society viewed a film on "Oral Cancer: The Problems of Early Diagnosis"

which was secured from The American Cancer Society in New York (Catalog ACS-6) and commends the film for use by other local groups.

Dr. John Paul Jarabak, Captain DC USN, U. S. Naval Hospital, Camp Lejeune was the guest speaker at the November meeting. He presented an illustrated lecture on "Differential Diagnosis in Oral Medicine." Dental officers from Camp Lejeune and Cherry Point were special guests at the meeting.

On December 4 the Society was a guest of the Navy at the professional meeting of the Second Dental Corps at Camp Lejeune.

Regular meetings of the Craven group are held the first Thursday night in each month.

The Demeritt Pedodontic Study Club is composed of ten dentists from Eastern North Carolina. They are: Charles P. Godwin, Rocky Mount; Lewis W. Lee, Wilson; Donald L. Henson, Kinston; W. L. Hand, New Bern; James H. Lee, Mount Olive; T. S. Fleming, Tarboro; Ben H. Houston, Goldsboro; R. B. Barden, Wilmington; Z. L. Edwards, Jr., Washington; and Mett B. Ausley, Warsaw.

The Club is making preparations for observance of National Children's Dental Health Week, February 8-14. Each of the members are submitting an article on dentistry for children for possible use by newspapers. A committee has been appointed to review the articles and select the ones to be released to the press.

The Rocky Mount Dental Society elected the following officers at its November meeting: A. G. Inscoe, Spring Hope, President; Rich-

ard F. Hunt, Jr., Vice-President; and David S. Jackson, Secretary-Treasurer.

Dr. R. D. Kornegay, Rocky Mount surgeon, spoke on "Antibiotics and the Newer Drugs."

The recognition of the dignity of the individual, even more than the increase of knowledge, is the special glory of the modern age.

—*American Scholar*

Obituaries

DR. ERNEST A. BRANCH, 70, Director of the Oral Hygiene Division of the State Board of Health for 29 years and an ADA and State Life Member of the Fourth District, died in Raleigh, December 3, 1958.

DR. C. M. PEELER, 73, an ADA and State Life Member of the First District, died in Shelby, November 19, 1958.



PREMIUM SCHEDULE

MAJOR HOSPITAL EXPENSE POLICY

PLAN I \$10,000.00 Maximum—\$100.00 Deductible

Age Group	Member Only		Member & Spouse		Member & Family	
	Ann.	6 Mos.	Ann.	6 Mos.	Ann.	6 Mos.
Under 40	\$22.00	\$11.50	\$ 54.10	\$27.55	\$ 86.10	\$43.55
40-49	36.60	18.80	83.25	42.15	110.25	55.65
50-59	51.85	26.45	116.10	58.55	136.10	68.55
60-69	83.60	42.30	181.40	91.20	195.80	98.40

PLAN II \$10,000.00 Maximum—\$300.00 Deductible

Under 40	\$13.20	\$ 7.10	\$ 34.10	\$17.55	\$ 46.20	\$23.60
40-49	22.00	11.50	51.70	26.35	63.80	32.40
50-59	34.10	17.55	75.90	38.45	88.00	44.50
60-69	58.30	29.65	120.00	60.50	137.50	69.25

PLAN III \$10,000.00 Maximum—\$500.00 Deductible

Under 40	\$ 8.80	\$ 4.90	\$ 21.65	\$11.30	\$ 28.85	\$14.90
40-49	14.65	7.80	33.30	17.15	40.55	20.75
50-59	23.05	12.00	51.60	26.30	58.75	29.85
60-69	41.80	21.40	90.70	45.85	97.90	49.45

OPTIONAL SURGICAL BENEFITS

(With no Deductibles)

\$300.00 Surgical Schedule

	Member Only		Member & Spouse		Member & Family	
	Ann.	6 Mos.	Ann.	6 Mos.	Ann.	6 Mos.
Under 40	\$ 4.10	\$ 2.55	\$ 9.05	\$ 5.00	\$ 14.00	\$ 7.50
40-49	6.10	3.55	15.35	8.15	20.30	10.65
50-59	9.90	5.45	24.75	12.35	29.70	15.35
60-69	15.80	8.40	39.60	20.30	44.55	22.75

\$500.00 Surgical Schedule

Under 40	\$ 6.85	\$ 3.90	\$ 15.10	\$ 8.05	\$ 23.35	\$12.15
40-49	10.15	5.55	25.55	13.25	33.80	17.40
50-59	16.50	8.75	37.50	19.25	45.00	23.00
60-69	24.00	12.50	60.00	30.50	67.50	34.25

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103rd ANNUAL SESSION

Pinehurst

May 3-6, 1959



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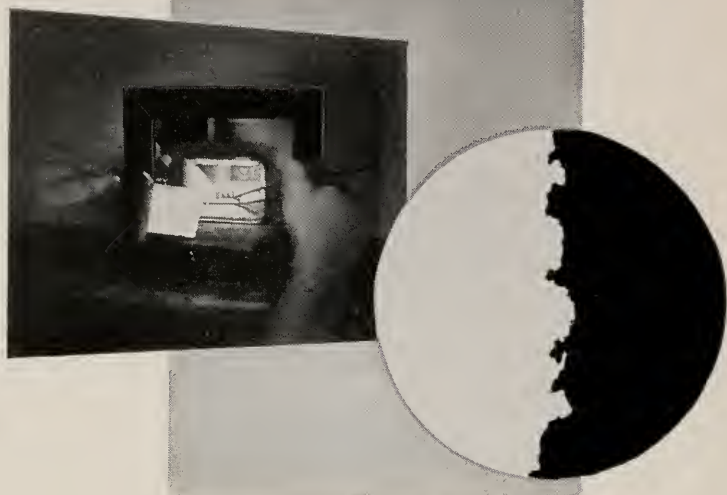
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VOLUME 42

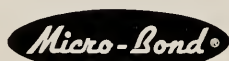
APRIL, 1959

NUMBER 3

MAGNIFIED 1,000 TIMES



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(A Constituent of the American Dental Association)

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VOLUME 42

APRIL, 1959

NUMBER 3

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Editor

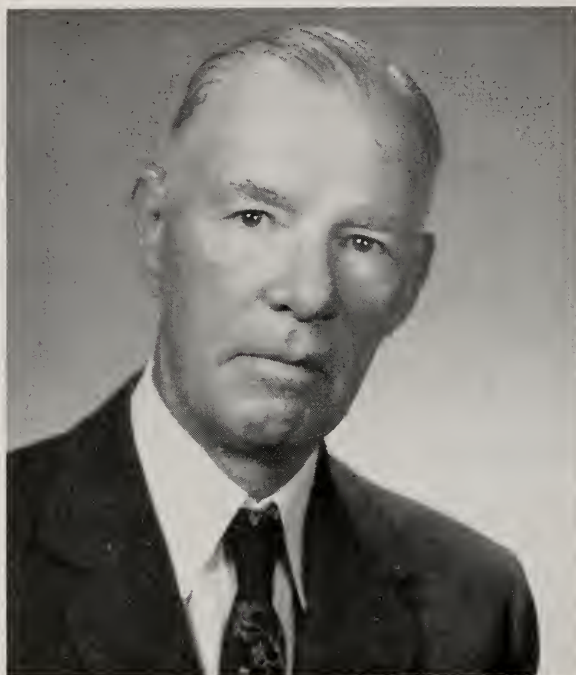
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**The Journal of the North Carolina Dental Society
Sincerely Dedicates This Issue to**



**J. GARVES POOLE, D.D.S.
Kinston, North Carolina**

Dr. J. Garves Poole was born in Wake County, July 25, 1894. He attended Wake Forest College and was graduated from the Medical College of Virginia in 1918.

He served on the staff of the Division of Oral Hygiene of the State Board of Health for about a year when the department was first organized. In 1919 he went to Kinston where he was one of the original members of the Kinston Clinic and one of the organizers of the Memorial General Hospital. He remained as Chief of Dental Surgery at the hospital until his retirement in 1954. For more than twenty years Dr. Poole was a member of the Lenoir County Board of Health.

He was elected President of the Fifth District Dental Society in 1923 and later represented his District in the House of Delegates of the North Carolina Dental Society.

A wise counselor and a loyal friend to all who know and love him, his brother dentists are proud to pay tribute to Dr. Poole in this modest way.



DR. MOSER

The President's Page



An Invitation

The officers of the North Carolina Dental Society and the Convention Committee extend to everyone a cordial invitation to the 103rd Annual Session.

All Committees have devoted unstinted thought and unlimited labor to make this meeting outstanding in every detail.

I wish to commend to you the scientific program which has been prepared for your pleasure and profit. It comprehends practically every phase of modern dentistry and the contributors to our program are outstanding in their fields.

In the general format and details of this meeting some innovations have been instituted which we believe will meet with your approval.

The programs of the North Carolina Dental Auxiliary, the Dental Hygienists' Association and the Dental Assistants' Association will be found elsewhere in this issue of the Journal. These are planned programs for the three groups so bring your Journal with you to this meeting.

There is every indication that our attendance record will be broken at this meeting and I hope to see you there.

S. EVERETT MOSER, D.D.S.

Gastonia
March 10, 1959



DR. BUTLER



From the Secretary's Desk

New Study Club Organized

As we come to the end of another year, I wish to express my personal thanks to each of you for the many courtesies extended me at the various meetings, as well as throughout the year. The Society has worked hard to make this a successful year.

Let us determine to continue the great philanthropy of our Society, be worthy of our profession, cooperate to the fullest extent with our new officers, and face our problems with courage, strength and wisdom.

On March 3, 1959, the Alamance County Dentists organized a Study Club. They will have monthly meetings. Congratulations! We hope that other groups will follow their fine example.

"Arriving at perfection is dangerous; striving after perfection is wholesome and good."

We know that organized Dentistry has much to offer every Dentist. Therefore, let us encourage our "newly acquired members" to attend the Annual Meeting at Pinehurst.

"We make a living by what we get; but we make a life by what we give."

LUTHER H. BUTLER, D.D.S.

Greensboro
March 10, 1959

Editorial

Let's Fight For It!

Conservatively speaking, it would be safe to say that the time spent by members of the Legislative Committee, and all connected with it, concerning dentistry's status with the two hospital insurance associations of the state, would number somewhere around 1,000 hours. How much money was spent, or how much it cost any individual, would be hard to estimate. The number of people involved would be hard to establish, for the discussion has even spilled over into the Medical Society.

Who is after what? How does this concern me? These are only two of the reactions to this committee's work. Let us try and get to the core of the Legislative Committee's work this past year.

The objective of the Committee was to negotiate with the two hospital insurance associations of the State to either omit a list of

dental operations that they would pay a physician for, but not a dentist; or to pay both dentist and physician.

Let us analyze this objective. First of all, to say that there would be no monetary reward for dentistry would be absurd, should the insurance associations enable dentists to be paid for listed dental operations. It will cost the insurance companies more also, for there would be a potential of 1,000 dentists eligible to receive payments. To cover this additional cost, the policyholder would certainly have an additional premium to pay. Another possibility might arise. Would there be that individual not fully qualified to perform the listed dental operations who would attempt such for the financial gain?

Now let's discuss some of the possible objections.

First of all, if our education and

scientific training does not entitle us to perform that which belongs to us, and fight for the rights of our profession, including the right to just monetary reward, we are disillusioned as to our professional obligations.

Second, if any hospital insurance association leads its policyholders to think that they are entitled to specific listed dental benefits, but will not pay the profession most qualified to perform them, we as a profession have no alternative but to try and correct it. It is estimated that the additional monthly cost per policy would be between 13¢ and 15¢ if the changes we request are granted. If this is brought to every policyholder's attention, it would (1) eliminate any misrepresentation on the part of the association, and (2) it would enable the most qualified profession to perform that which belongs to it.

Third, there are certain to be individuals that will exploit this new source of income. What profession exists, in whose ranks exploitation is non-existent? Undoubtedly we have individuals within our ranks that might fill a non-carious pit, solely for the dollar; or insert a partial where fixed bridges are clearly indicated. Also, most of us have known of cases where sound teeth were extracted and plates inserted, for one reason or another. We must have confidence that the overwhelming majority of our profession will be as ethical regarding these oral surgery fees as they are

with their operative, prosthetic, periodontic, orthodontic, or endodontic fees. We should not penalize any profession as a whole because of a certain few unethical members.

The major issue has not been touched on as yet, however. Although the hassle with the hospital insurance associations has consumed the headlines, it is only secondary in importance. Those who wish to be complacent and keep hands off are only encouraging the man with the M.D. degree to do work that rightfully belongs to dentistry. If dentistry really became aroused, we would proclaim that dentistry is for dentists, and there would be no compromise. The medical profession fights that way for what they believe in. Contrary to some thinking, dentistry is not subservient to medicine. Dentistry and medicine are allied professions that should work hand in hand for the patient's good.

Where is our esprit de corps? Have we not been pushed around long enough in the armed services? What about many of our hospitals that are pushing out the dental profession? Why don't some insurance companies recognize us? On the other end of the ledger, we are forced to fight the public denturist. Continued complacency, and willingness to compromise will leave us nothing but pushing amalgams. It is high time we forget complacency and take the offensive. Ours is a noble profession. Let's fight for it! — C.C.D.

103rd ANNUAL SESSION

1959

THE NORTH CAROLINA DENTAL SOCIETY



MAY 3-6, 1959

THE CAROLINA
PINEHURST, NORTH CAROLINA

General Information

REGISTRATION

The registration desk will open at 1:00 p.m. Sunday, May 3, in the foyer of The Carolina. Members must present their ADA cards.

GENERAL SESSIONS

There will be four General Session meetings: Sunday evening at 8:30, Monday morning at 9:30, Monday evening at 8:00, and Wednesday morning at 11:30. Everyone is cordially invited to attend all General Sessions except Monday evening when officers will be elected.

HOUSE OF DELEGATES

There will be four meetings of the House of Delegates: Sunday afternoon at 3:00, Monday evening at 9:00, Tuesday morning at 9:00, and Wednesday morning at 10:00.

COMMERCIAL EXHIBITS

The newest and latest in dental equipment will be on display on the West Wing Porches of The Carolina. The exhibits will be open on Monday and Tuesday from 9:00 a.m. to 5:00 p.m., and on Wednesday from 9:00 a.m. until 11:00 a.m. This is a most important part of the meeting and you are urged to visit all the booths.

Free refreshments will be served in the Exhibit Area through the courtesy of the North Carolina Dairy Products Association, the Aberdeen Coca-Cola Bottling Company and the Seven-Up Bottling Company of Fayetteville.

SCIENTIFIC EXHIBITS AND VISUAL EDUCATION

A number of scientific exhibits will be available for inspection in the Cocktail Lounge of The Carolina during the entire meeting. See list on page 149.

Four films on dentistry in color and sound will be shown. See schedule on page 149.

GOLF TOURNAMENT AND DINNER

A Golf Tournament will be held Sunday on the beautiful Pinehurst Country Club Course. Teeing-off time is from 9:00 a.m. to 2:00 p.m. No entries will be allowed to start after 2:00 p.m. Scores must be turned in by 6:00 p.m. An entry fee of 50c will be charged.

Dave W. Smith, Jr., of Gastonia, who has the reputation of being able to hit a golf ball "a country mile" will give a driving exhibition at 10:30 a.m. at the Pinehurst Country Club.

Golf trophies will be awarded by Dave Smith at the Golf Dinner at 7:00 p.m., Sunday, in the Crystal Room of The Carolina.

SKEET SHOOT

A Skeet Shoot will be held at the Pinehurst Gun Club Sunday, May 3, at 1:30 p.m. Trophies will be awarded to the best shot at the Golf Dinner, 7:00 p.m., Sunday in the Crystal Room.

BANQUET, VARIETY SHOW AND DANCE

The annual banquet of the Society will be held Tuesday at 7:00 p.m. in the Dining Room of The Carolina.

General Information

A "pot pourri" of talent will perform at the Variety Show in the Ballroom, Tuesday at 8:45 p.m., including the UNC School of Dentistry Chorus under the direction of Dr. Roger E. Sturdevant.

A dance at 10:00 p.m. in the Ballroom will conclude Tuesday night's festivities.

DISTRICT OFFICERS' CONFERENCE BREAKFAST

The District Officers Conference will meet Monday morning at 8:00 a.m. in the Crystal Room.

PAST PRESIDENTS' BREAKFAST

All Past Presidents are invited to meet Tuesday morning at 8:00 a.m. in the Crystal Room.

FOR THE LADIES

A schedule of events has been planned especially for the ladies by the North Carolina Dental Auxiliary. See page 157.

FRATERNITIES

Meet your fraternity buddies at the Fraternity Hour, Tuesday afternoon at 4:00 p.m. Delta Sigma Delta will meet in the Bridge Room, Psi Omega in the Pine Room and Xi Psi Phi in the Dutch Room.

DRAWING OF PRIZES

Approximately \$300.00 worth of prizes will be given to lucky winners at a drawing Wednesday morning at the close of the General Session. Only dentists are eligible and you must be present to win.

RECEPTION

Members and their guests are cordially invited to a Reception honoring the State Officers and distinguished visitors on Tuesday at 5:00 p.m. in the Ballroom of The Carolina.

COFFEE BAR

The North Carolina Dental Auxiliary will sponsor a Coffee Bar from 10:00 p.m. to 12:00 midnight, Sunday and Monday in the Dutch Room.

ALLIED MEETINGS

American College of Dentists, Carolinas Section, Sunday, May 3, 12:30 p.m., luncheon, Crystal Room, The Carolina.

North Carolina Dental Assistants' Association, Holly Inn, May 2-5.

North Carolina Dental Auxiliary, The Carolina, May 3-5.

North Carolina Dental Hygienists' Association, Mid Pines Club, Southern Pines, May 3-5.

North Carolina Dental Society of Anesthesiology, Sunday, May 3, 3:00 p.m., Bridge Room, The Carolina. George C. Albright, D.D.S., guest speaker.

North Carolina Unit of the American Academy of Dental Medicine, Tuesday, May 5, 12:00 noon, luncheon, Crystal Room, The Carolina.

University of Maryland Dental Alumni, Monday, May 4, 12:00 noon, luncheon, Crystal Room, The Carolina.



Left to right: Drs. Butler, Teague, Moser and Sherrod

NORTH CAROLINA DENTAL SOCIETY

OFFICERS 1958-1959

S. Everett Moser, D.D.S.....	President
W. B. Sherrod, D.D.S.....	President-Elect
Charles H. Teague, D.D.S.....	Vice-President
Luther H. Butler, D.D.S.....	Secretary-Treasurer
C. C. Diercks, D.D.S.....	Editor-Publisher
Andrew M. Cunningham.....	Executive Secretary

Featured Speakers

General Session Monday, May 4
9:30 a.m. Ballroom

PAUL HAROLD JESERICH,
D.D.S., F.A.C.D.
Ann Arbor, Michigan
President-Elect
American Dental Association

Dr. Jeserich has had a distinguished career as an educator, dental executive and private practitioner. Since 1950 he has been Dean of the University of Michigan School of Dentistry.

Dr. Jeserich will speak on "Some Problems Facing the Dental Profession As It Completes Its First Hundred Years."



Dr. Jeserich

General Session Monday, May 4
9:30 a.m. Ballroom

HOWARD B. HIGGINS,
D.D.S., F.A.C.D.
Spartanburg, South Carolina
Trustee, Fifth District
American Dental Association

Dr. Higgins is well-known to North Carolina dentists, having served two-terms as Trustee from the Fifth District. He is a native Tarheel, but has practiced in Spartanburg since his graduation from Atlanta Southern Dental College in 1923. He will give his Trustee's Report on the progress of the American Dental Association during the past year.



Dr. Higgins

General Session Sunday, May 3
8:30 p.m. Ballroom

SANDY COLE MARKS, D.D.S.
Belgian Congo, Africa

In 1948 Dr. Marks left a successful practice in Wilmington to become a dental missionary of the Presbyterian Church to the Belgian Congo. There he established the first dental college at Lubondai and is training natives to work on the teeth of their own people, besides caring for the dental health of other missionaries and their children.

He studied at Davidson College, was graduated from Emory University School of Dentistry and did post-graduate study at Northwestern University School of Dentistry. He is currently on furlough and he and his wife Katherine are living in Richmond.

His story on "Dentistry on the Mission Field" is one of the most thrilling episodes in dental history.



Dr. Marks

Program

103rd Annual Session

Sunday, May 3

9:00 a.m.	GOLF TOURNAMENT.....	Pinehurst Country Club
10:30 a.m.	DRIVING EXHIBITION, Dave W. Smith, Jr.....	Pinehurst Country Club
1:00 p.m.	REGISTRATION BEGINS	
1:30 p.m.	SKEET SHOOT.....	Pinehurst Gun Club
3:00 p.m.	HOUSE OF DELEGATES, First Session.....	Ballroom
7:00 p.m.	GOLF DINNER.....	Crystal Room
8:30 p.m.	FIRST GENERAL SESSION.....	Ballroom
	Invocation	
	Necrology Service—Boyce A. Brawley, D.D.S.	
	Greetings from—	
	N. C. Dental Auxiliary, Mrs. Walter E. Clark	
	N. C. Dental Hygienists' Assn., Mrs. Elsie Haithcock	
	N. C. Dental Assistants' Assn., Miss Sarah Bizzell	
	Dental Foundation of N. C., Inc., C. C. Poindexter, DDS	
	Introduction of Guests—Walter T. McFall, D.D.S.	
	Guest Speaker—Sandy C. Marks, D.D.S., Belgium Congo, Africa, "Dentistry on the Mission Field"	

Monday, May 4

8:00 a.m.	DISTRICT OFFICERS' CONFERENCE	
	BREAKFAST.....	Crystal Room
9:00 a.m.	FILM	Ballroom
	"Correlation of Structure and Function of the Temporomandibular Joint"	
9:30 a.m.	SECOND GENERAL SESSION.....	Ballroom
	Report—Howard B. Higgins, D.D.S., Trustee, Fifth District, A.D.A.	
	Guest Speaker—Paul H. Jeserich, D.D.S., President-Elect, A.D.A.	
	"Some Problems Facing the Dental Profession As It Completes Its First Hundred Years"	
	President's Address—S. Everett Moser, D.D.S.	
11:00 a.m.	LEROY W. PETERSON, D.D.S.....	Ballroom
	"Basic Principles and Techniques in Oral Surgery"	
2:00 p.m.	FILM	Ballroom
	"Pain Control in Children's Dentistry"	
2:30 p.m.	S. MEIGS JONES, D.D.S.....	Ballroom
	"Better Dentistry Faster"	
8:00 p.m.	THIRD GENERAL SESSION.....	Ballroom
	Election of Officers	
	Selection of meeting site for 1961	
9:00 p.m.	HOUSE OF DELEGATES, Second Session.....	Ballroom

Program

103rd Annual Session

Tuesday, May 5

- 8:00 a.m. PAST PRESIDENTS' BREAKFAST.....Crystal Room
- 9:00 a.m. HOUSE OF DELEGATES, Third Session.....Bridge Room
- 9:00 a.m. FILMBallroom
"Routine Amalgam Techniques in Practice of Endodontia"
- 9:30 a.m. PROJECTED CLINICS.....Ballroom
Clarence L. Sockwell, D.D.S.—"High Speed"
J. B. Freedland, D.D.S.—"Retrograde Root Canal Fillings
in Calcified or obstructed Canals"
Robert H. Sager, D.D.S.—"Proliferative Oral Lesions"
Norman F. Ross, D.D.S.—"Crown and Bridge Pro-
cedures"
- 10:30 a.m. STANLEY C. HARRIS, Ph.D.....Ballroom
"The Use and Abuse of Drugs in Dentistry"
- 2:00 p.m. FILMBallroom
"Hypnosis in Dentistry"
- 2:30 p.m. LEROY W. PETERSON, D.D.S.....Ballroom
"Surgical Management of Benign Cysts and Tumors"
- 4:00 p.m. FRATERNITY HOUR
Delta Sigma Delta.....Bridge Room
Psi Omega.....Pine Room
Xi Psi Phi.....Dutch Room
- 5:00 p.m. RECEPTION FOR MEMBERS AND THEIR
GUESTSBallroom
- 7:00 p.m. ANNUAL BANQUET.....Dining Room
Awarding of President's Emblem
- 8:45 p.m. VARIETY SHOW.....Ballroom
- 10:00 p.m. DANCE.....Ballroom

Wednesday, May 6

- 9:00 a.m. TABLE CLINICS.....Bridge Rooms and East Porches
- 10:00 a.m. HOUSE OF DELEGATES, Fourth Session.....Ballroom
- 11:30 a.m. FOURTH GENERAL SESSION.....Ballroom
Installation of Officers
Drawing of prizes
- 12:00 noon ADJOURNMENT

Essayists



Dr. Peterson

Monday, May 4, 11:00 a.m. Ballroom

"BASIC PRINCIPLES AND TECHNIQUES IN ORAL SURGERY"

This discussion will stress the surgical care of the dental patient, including pre- and post-operative management, and the adjunctive use of drugs. The factors involved in surgical judgment will be more thoroughly covered than actual techniques in operative procedures. Various surgical problems encountered in the office will be illustrated in discussing the anatomical, physiological and psychological factors in surgical care.



Dr. Jones

**LEROY W. PETERSON,
D.D.S., F.A.C.D.
Clayton, Missouri**

Dr. Peterson was graduated from the University of Michigan and interned in Oral Surgery at Henry Ford Hospital in Detroit. He is a member of the American Society of Oral Surgeons and a Diplomate of the American Board of Oral Surgery. Since 1948 he has been Professor of Oral Surgery at Washington University School of Dentistry but is now on part-time status and devotes a major portion of his time to private practice.

Tuesday, May 5, 2:30 p.m. Ballroom

"SURGICAL MANAGEMENT OF BENIGN CYSTS AND TUMORS"

Primarily this discussion will cover those tumors of dental origin, both solid and cystic, and other benign lesions commonly seen in the oral cavity. An approach to differential diagnosis of radiolucent areas in bone will be given. The enucleation and marsupialization techniques in treating cystic lesions of the jaws will be discussed. This lecture will bear in mind the importance of the dentist's knowledge in diagnosing as well as treating these tumors.

**S. MEIGS JONES, D.D.S.
Kansas City, Missouri**

Monday, May 4, 2:30 p.m. Ballroom

"BETTER DENTISTRY FASTER"

A graduate of Kansas City Western Dental College, Dr. Jones is a general practitioner in Kansas City. He has lectured in Alaska, Hawaii, and most parts of the United States on dental economics and high speed techniques.

He will make an up-to-date presentation on building and maintaining a lucrative dental practice and the latest developments in high speed techniques. He will illustrate original procedures with color slides.

Essayist

STANLEY C. HARRIS, Ph.D.
Chicago, Illinois

Tuesday, May 5, 10:30 a.m. Ballroom

"THE USE AND ABUSE OF DRUGS IN DENTISTRY"

Dr. Harris is Professor and Chairman of the Department of Physiology and Pharmacology at the Dental School of Northwestern University, where he received his Doctorate in Medical Science.

He will discuss the drugs indicated and contra-indicated, as well as the best procedures in local anesthesia, and analgesia, sedation, tranquilization and control of infection. His presentation will emphasize clinical practicability.



Dr. Harris

GET YOUR COPY AT PINEHURST

THE NEW DENTAL FORMULARY

Published jointly by The North Carolina Dental Society
and The North Carolina Pharmaceutical Association

OVER 100 PAGES, BOUND IN A FLEXIBLE
BLACK PLASTIC LOOSELEAF BINDER, FOUR
MAJOR SECTIONS —

PRESCRIPTIONS — PATIENT MEDICATION —
OFFICE MEDICATION — EMERGENCIES IN THE DENTAL
OFFICE, PLUS AN INDEX AND LIST OF
MANUFACTURERS

Table Clinics

Wednesday, May 6, 9:00-11:00 a.m.

Ballroom

1. Elastic Impression of Mandibular Arch with Personalized Tray—
Dr. C. A. Pless, Asheville
2. Crown and Bridge Procedures.....Drs. Norman F. Ross and
Baxter B. Sapp, Jr., Durham
3. Preventive Orthodontia by the General Practitioner—
Dr. Eugene N. Shapiro, Asheville
4. A Method for Re-basing Dentures.....Dr. S. B. Towler, Raleigh
5. Modified Tray and Impression Technics....Dr. J. O. Thorpe, Charlotte
6. Fundamentals in Occlusal Equilibrating.....Drs. B. N. Walker and
G. C. Stowe, Charlotte
7. Large Amalgam Restorations.....Dr. Robert H. Watson, Charlotte
8. Multiple Tooth Preparation for Crown and Bridge and Copper Band
as a Temporary Bridge.....Dr. Leonard B. Barber, Hendersonville
9. Apicoectomy for the General Practitioner.....Dr. David H. Becker,
Asheville
10. Endodontics.....Dr. Luther H. Butler, Greensboro
11. Removable and Stationary Splints for Periodontally Involved Teeth—
Dr. H. Royster Chamblee, Raleigh
12. Complete Denture Impressions.....Dr. Nathan R. Callaghan, Jr.,
Durham
13. Spot Welded Bands in Alloy Restorations.....Dr. Albert P. Cline,
Canton
14. Full Dentures Emphasizing Swallowing Co-ordinator—
Dr. L. G. Coble, Greensboro
15. New Approach to Endodontia.....Dr. J. G. Crowell, Hendersonville
16. Palliative Orthodontics for the General Practitioner—
Dr. W. L. Hand, Jr., New Bern
17. Removable Partial Denture Design Rationale.....Dr. Norman J. Holly,
Hendersonville
18. Occlusal H.....Dr. Joseph M. Johnson, Laurinburg
19. Occlusal Correction in Temporomandibular Joint Disturbances—
Dr. Charles M. Johnston, Charlotte
20. Contact.....Dr. C. P. Osborne, Jr., Lumberton

UNC SCHOOL OF DENTISTRY

21. Crown and Bridge Prosthodontics.....Dr. Bennie D. Barker
22. Procedures in Periodontics.....Dr. Walter T. McFall, Jr.
23. Prosthodontics—Partical Dentures.....Dr. Matthew T. Wood

NORTH CAROLINA DENTAL HYGIENISTS' ASSOCIATION

24. Something Pertaining to Dental Hygiene.....Mrs. Loretta Angstadt

NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION

25. Photographs and Cast As An Aid In Diagnosis.....Mrs. Louise Primm

Scientific Exhibits

Monday, May 4, 9:00 a.m. to Wednesday, May 6, 11:00 a.m.
Cocktail Lounge

Dentists are invited to inspect the following Scientific Exhibits which will be on display throughout the meeting in the Cocktail Lounge beginning on Monday, May 4 at 9:00 a.m.

1. American Cancer Society, North Carolina Division
2. Division of Oral Hygiene, North Carolina State Board of Health
3. North Carolina Dairy Council
4. North Carolina Heart Association
5. University of North Carolina School of Dentistry

Visual Education

Monday, May 4 and Tuesday, May 5

Ballroom

The following films will be shown in the Ballroom preceding all main speakers:

Monday, May 4:

- 9:00 a.m.** "Correlation of Structure and Function of the Temporomandibular Joint (1956) (Color and magnetic sound)
- 2:00 p.m.** "Pain Control in Children's Dentistry" (1956) (Color and sound)

Tuesday, May 5:

- 9:00 a.m.** "Routine Amalgam Techniques in the Practice of Endodontia" (1955) (Color and sound)
- 2:00 p.m.** "Hypnosis in Dentistry" (1954) (Magnetic sound)

Projected Clinics

Tuesday, May 5, 9:30 a.m.

Ballroom

1. "High Speed".....Clarence L. Sockwell, D.D.S., UNC School of Dentistry
2. "Retrograde Root Canal Fillings in Calcified or Obstructed Canals"—
J. B. Freedland, D.D.S., Charlotte
3. "Proliferative Oral Lesions".....Robert H. Sager, D.D.S.
UNC School of Dentistry
4. "Crown and Bridge Procedures".....Norman F. Ross, D.D.S., Durham

Driving Exhibition

by

DAVE W. SMITH, JR., Gastonia

Pinehurst Country Club

Sunday, May 3, 10:30 a.m.



Dave Smith

Dave Smith is known in the golfing trade as "the big 'un," and not without reason. He stands six feet four, weighs 235 pounds and has the reputation of being one of the longest drivers, amateur or pro, in the business today.

This husky University of South Carolina graduate has played in eight national amateur tournaments, and survived five gruelling rounds in Detroit five years ago for his best showing.

In the spring of 1958, the 32-year old Gastonia Chevrolet dealer par-

ticipated in the National Open at Tulsa, Oklahoma.

He won the Carolinas Amateur in Rocky Mount in 1955, the year the tournament spilled over with outstanding talent, and turned up with the medalist score in a North-South tournament at Pinehurst.

The golf committee is proud to present Dave in a Driving Exhibition on Sunday at 10:30 a.m. at the Pinehurst Country Club, and to have him as its guest at the Golf Dinner at 7:00 p.m. Sunday evening in the Crystal Room, when he will award the golf trophies.

HOUSE OF DELEGATES

1959

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W. Howard Branch

Fifth District

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W. W. Umphlett
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NORTH CAROLINA DENTAL SOCIETY

1958-1959

STANDING COMMITTEES

ADVISORY COMMITTEE FOR VETERANS ADMINISTRATION PROGRAM: B. N. Walker (1962), Chairman; H. E. Plaster (1961), C. H. Teague (1960), Guy E. Pigford (1959), L. D. Herring (1963).

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MEMBERSHIP COMMITTEE: W. B. Sherrod, Chairman; A. L. Poovey, J. A. Harrell, W. P. Hinson, Jr., J. B. Powell, W. H. Gray, Jr.

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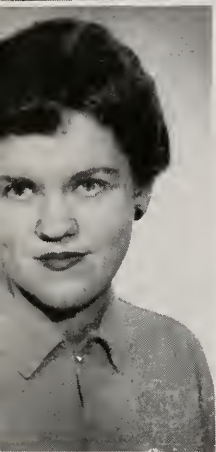
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NORTH CAROLINA DENTAL AUXILIARY

NINTH ANNUAL MEETING

THE CAROLINA, PINEHURST, NORTH CAROLINA

May 3-5, 1959



PROGRAM

Sunday, May 3

P.M.

1:00- 5:00	REGISTRATION	Foyer
8:30	GENERAL SESSION, NORTH CAROLINA DENTAL SOCIETY	Ballroom
	(Auxiliary Members Cordially Invited)	

Monday, May 4

A.M.

8:45- 9:45	REGISTRATION	Foyer
8:30	18 HOLE GOLF TOURNAMENT.....	Pinehurst Country Club
9:00	9 HOLE GOLF TOURNAMENT.....	Pinehurst Country Club
10:00	BRIDGE AND CANASTA.....	Bridge Room
11:00	PUTTING CONTEST FOR NON-GOLFERS....	Pinehurst Country Club

P.M.

1:30	GOLFERS' LUNCHEON.....	Pinehurst Country Club
	Awarding of Trophies (Luncheon ticket: \$3.00. Hotel tickets honored.)	
2:00- 3:00	REGISTRATION	Foyer
2:30	EXECUTIVE BOARD MEETING.....	Bridge Room
4:00	PAST PRESIDENTS' MEETING.....	Bridge Room

Tuesday, May 5

A.M.

8:15- 9:15	REGISTRATION	Foyer
9:30	BRUNCH.....	Dining Room
	Honoring new members, wives of senior dental students, special guests (Hotel breakfast tickets honored)	
	Entertainment	
	Business Meeting	

P.M.

5:00	RECEPTION, NORTH CAROLINA DENTAL SOCIETY....	Ballroom
7:00	BANQUET, NORTH CAROLINA DENTAL SOCIETY.....	Dining Room
8:45	VARIETY SHOW.....	Ballroom
10:00	DANCE	Ballroom

NOTE: Coffee Bar, sponsored by the Dental Auxiliary will be open from 10:00 p.m. until 12:00 midnight, Sunday and Monday in the Dutch Room.

NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION

NINTH ANNUAL MEETING

HOLLY INN, PINEHURST, NORTH CAROLINA

May 2-5, 1959

PROGRAM

Saturday, May 2

P.M.

5:00	REGISTRATION.....	Main Lobby
7:30	MEETING OF NOMINATING COMMITTEE.....	
8:00	MEETING OF BOARD OF DIRECTORS.....	Ballroom
9:00	OPEN HOUSE.....	Card Room

Sunday, May 3

A.M.

8:00	BREAKFAST HONORING PAST PRESIDENTS....	Main Dining Room
9:00	REGISTRATION	Main Lobby
10:00	FIRST SESSION BUSINESS BODY.....	Ballroom

P.M.

1:00	LUNCHEON HONORING GUESTS.....	Main Dining Room
2:00	REGISTRATION	Main Lobby
2:30	GENERAL SESSION.....	Ballroom
	Address of Welcome.....	Capt. E. L. Robinson, Ft. Bragg
	Response.....	Mary Nell Innman
	Address.....	Dr. W. B. Sherrod, President-Elect, NCDS
	Address.....	Dr. Barry G. Miller
	Address.....	Elma Troutman, President, ADAA
	President's Address.....	Sarah Bizzell
8:00	MEETING OF THE BOARD OF DIRECTORS.....	Ballroom
9:00	SOCIAL HOUR.....	Card Room

Monday, May 4

9:00	REGISTRATION	Main Lobby
9:30	SECOND SESSION BUSINESS BODY.....	Ballroom
11:30	TABLE CLINICS.....	Ballroom
	There will be no business session scheduled for Monday afternoon. There will be scientific exhibits and educational films at the meeting of the North Carolina Dental Society at The Carolina for those who wish to attend.	
7:30	BANQUET.....	Main Dining Room
	Master of Ceremonies, Dr. Guy R. Willis	
9:30	DANCE HONORING PRESIDENT SARAH BIZZELL.....	Ballroom

Tuesday, May 5

9:00	REGISTRATION	Main Lobby
9:30	THIRD SESSION BUSINESS BODY.....	Ballroom
11:00	FOURTH SESSION BUSINESS BODY.....	Ballroom
	There will be a meeting of the Board of Directors following adjournment.	

NORTH CAROLINA DENTAL HYGIENISTS' ASSOCIATION

ANNUAL MEETING

May 3-5, 1959



PROGRAM

Sunday, May 3

P.M.

- 3:00 EXECUTIVE COUNCIL MEETING.....Official Suite, Mid Pines Club
5:30- 7:30 OFFICIAL RECEPTION.....Terrace, Mid Pines Club

Monday, May 4

A.M.

- 9:00 REGISTRATION
9:30 OPENING SESSION
10:00 GREETINGS.....A. Dwight Price, D.D.S., Chairman
Advisory Committee to the N.C.D.H.A.
10:30 "ACCIDENTS WILL HAPPEN".....Arthur C. Riddle, Jr., D.D.S.
11:30 GREETINGS.....S. Everett Moser, D.D.S., President
North Carolina Dental Society
11:45 BUSINESS SESSION

P.M.

- 1:30 LUNCHEON.....Mid Pines Club
3:00 OPEN FOR COMMITTEE MEETINGS, VISITING EXHIBITS AND
RECREATION
5:30 SOCIAL HOUR.....Official Suite, Mid Pines Club

Tuesday, May 5

A.M.

- 10:00 BUSINESS SESSION
10:30 "PUBLIC RELATIONS".....Mr. Ray Killian, Personnel Director
Belk Brothers Company
Charlotte
11:00 "THE JOYS AND PROBLEMS OF CHILDREN'S
DENTISTRY".....Barry G. Miller, D.D.S., Charlotte
11:45 BUSINESS SESSION

P.M.

- 2:00 EXECUTIVE COUNCIL MEETING.....Official Suite, Mid Pines Club
3:00 ADJOURNMENT

NOTE: All meetings will be held in the Dutch Room of The Carolina, except as indicated.

SAVE YOUR ORDER
for the
103RD ANNUAL SESSION

PINEHURST

MAY 3-6, 1959



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COFFEE BAR

Sunday and Monday Nights 10 p.m. to Midnight

The Tracheotomy As Related to Dentistry

EDWARD U. AUSTIN, D.D.S.

A patient having sustained a severe blunt injury to the face is seen in the office or the hospital with the face swollen and distorted and in parts depressed. There are lacerations of the skin and superficial soft tissues, with perhaps some of the soft tissue torn back in the form of flaps. The patient's face is covered with dirt and blood. Blood is dripping from the nose and mouth and running into the pharynx. This makes the patient cough and sputter, and interferes with the freedom of his airway. This makes breathing difficult and the patient becomes cyanosed, which again tends to increase the amount of bleeding. The eyes may be unable to open due to swelling of the eyelids. Various bony injuries may be obvious to inspection. The frontal sinus may be driven in, the nose crushed, the maxilla and the mandible fractured, the alveolar margin distorted and teeth loosened and detached. The patient may show general signs of shock and loss of blood.

Traumatic Injuries Increasing

This is not a very pretty picture, nor is it one that is generally seen first by the dentist. It is truly an injury of our modern civilization. With the automobile and airplane becoming daily more common agents of transportation, the likelihood of such traumatic injuries is on the upgrade. It might be mentioned that with the war clouds

darkening over the East, making it appear as though we are soon to become engaged in another world conflict, such pictures are likely to be more commonly confronted by the dentist. With the possibilities of these injuries increasing, the greater are the chances of a dentist being the first to see the patient. In any event, one of the primary essentials of the emergency surgeon is to see that the patient's airway is open. In many cases the answer is the emergency tracheotomy.

The Dentist Must Be Prepared

There is always the possibility every dentist may be confronted with a case of laryngeal obstruction that will countenance no delay in providing a patient with an adequate airway. Opening the trachea in order to allow passage of life-giving air falls within the realm of the laryngologist. Regardless, there may come a time when a tracheotomy must be performed at once, and there will not be sufficient time to call for the surgeon trained in bypassing the larynx. In our every day life the need may arise, in the home, on the street, in the office, or in the hospital bed. The time to take the patient to a well-equipped operating room or secure the services of the laryngologist may make the difference between life and death. Because time is such a great factor, should the occasion arise, every dentist should

be well versed in the performance of the emergency tracheotomy. In our dental literature the discussion of what could be the dentist's greatest asset is very meager. It is true the dentist is taught the technique of the tracheotomy in his academic training; but like the ten commandments, every generation at regular intervals needs a fresh proclamation. For these reasons this paper is prepared.

History of the Tracheotomy

The tracheotomy is the operation of making an airway through the neck into the trachea. It is usually done to prevent asphyxia. As a surgical procedure it is not new, nor has the method of performing it been improved upon for the past twenty years. This paper is not presented with the hope of bringing forth new light on the subject but rather as a re-statement of established principles, since these principles could be of such grave importance to the dentist.

Blonchotomy was proposed by Asclepiades in 124 B.C. and has been described by all writers of surgery from Paulus of Aegeneta (629-690 A.D.) down to the present time. In Paulus of Aegeneta writings in the seventh century there appears a chapter on "laryngotomy." In this work he quotes from Antylus (2nd Century A.D.) an operation called "pharyngotomy" which is clearly the tracheotomy. Up to the sixteenth century several writers have described or referred to the operation, but few appear to have performed it. The first known performance of the operation was done by Andrew Musa Brassavola, the Italian Surgeon, in 1546. It was

not until 1620 when another successful case was reported by Nicholas Habicot, of Paris. He published accounts of four such operations performed by him. Habicot's book of 108 pages is the first work which is limited to an account of the operation. The first record in English literature appears in December, 1730, by George Martaine in Saint Andrews, England.

In 1718, Lorenz Heister suggested that the term "tracheotomy" be used in place of the terms "bronchotomy" or "laryngotomy" for any opening in the asperia arteria or windpipe. It was not until the nineteenth century that this term became universally adopted. It was Desault (1744-1795) who clearly distinguished between laryngotomy and tracheotomy. Bretonneau (1778-1862) and Trousseau (1801-1867), who did so much to bring the operation into use for laryngeal diphtheria, called it "tracheotomy" and since that time it has always been known by that name.

The writers up to 1620 recommended the operation for acute inflammatory disease in which the larynx was involved. At this date Nicholas Habicot performed the first recorded case for removal of a foreign body, in this case a blood clot, from the larynx. It was not until 1792, when Baron Percy recommended tracheotomy for the purpose of extracting a foreign body, that consideration was given the operation for this use.

The Tracheotomy in Modern Medicine

Modern medicine utilizes the tracheotomy to a great extent as

there are many indications for its use. The following outline from the works of Drs. Simpson and Witcher¹ indicates its many uses.

Indications for tracheotomy.

1. Foreign bodies in the larynx or trachea.
2. Acute infectious disease involving the larynx and/or trachea directly or indirectly.
 - a. Laryngo — trocho — bronchitis
 - b. Diphtheria
 - c. Poliomyelitis
 - d. Tetanus
 - e. Chickenpox, measles, scarlet fever
 - f. Lung abscess of epiglottis
 - g. Cellulitis of the neck
3. Trauma to larynx or trachea
 - a. War injuries
 - b. Fights
 - c. Stab wounds
 - d. Intratracheal anesthesia
 - (1) Post operative edema
 - e. Post thyroidectomies
 - f. Bronchoscopy with too large a scope
4. Subcutaneous emphysema
5. Tumors encroaching on airway

The indications for the tracheotomy that might directly affect the dentist are foreign bodies in the larynx or trachea, cellulitis of the neck, and traumatic injuries. The foreign bodies that might get into the trachea are numerous while a dentist is operating on a patient. With all precautions, occasionally this might happen to anyone. Even with antibiotics and chemotherapy, infections still develop and some

of these may go too long before treatment is sought, thus setting the stage for a tracheotomy. In cases of traumatic injury, the dentist may be the only capable person present and should be prepared.

The question may come to mind about when to do a tracheotomy. The indications do not tell you when you might have time to get a laryngologist or when it might be better surgical judgment for you to do an emergency tracheotomy. The cardinal signs of obstructive laryngeal dyspnea should be followed. According to Dr. T. M. Irwin² they are as follows:

- “1. Indrawing of substernal notch.
2. Indrawing around the clavicles.
3. Indrawing of the intercostal spaces.
4. Indrawing of the epigastrium, forming a ‘funnel breast.’
5. Restlessness.
6. Choking and waking as soon as the aid of the voluntary muscles cease in falling to sleep.
7. Ashy color of the face.
8. Cynosis.”

Remember cynosis is a terminal affair and one should not wait for this appearance before doing a tracheotomy. If laryngeal obstruction is suspected, and the patient has substernal indrawing associated with the ashy color of the face, then is the critical moment. Do not wait until the patient has exhausted his respiratory and cardiac reserve before performing a tracheotomy. “The number of tracheotomies done too late far outweigh those done unnecessarily.”³

¹ Simpson, W. L. and Witcher, J. E., *Tracheotomy and its indications* Memphis M. J., 23:211, November, 1948.

² Irwin, T. M., *Indications for tracheotomy*, J. Florida M. A. 33:642-44, May 1947.

³ Warden, F. *Tracheotomy*, J. South Carolina M. A., 43:133-May, 1947.

There are no contraindications for the tracheotomy, especially ones of the emergency procedure.

Two Classifications of Procedures

There are two classifications of procedures for the tracheotomy. They are the planned or orderly tracheotomy and the emergency tracheotomy. The surgeons of old were much afraid of cutting the isthmus of the thyroid body. However, in 1720, Dr. Garengat showed there was no danger in

cutting the isthmus. Today the classification of high or superior and low or inferior tracheotomy based on the relationship of the thyroid isthmus is now obsolete. According to this classification the operation of choice, be it orderly or emergency, is the inferior type. The superior tracheotomy, with its subsequent damage to the larynx, is condemned. Dentists are not concerned with the orderly type as that is the duty of our colleague, the laryngologist, and in this paper we will not consider its technique. (Fig. 1.)

The anesthesia of choice in the tracheotomy is local anesthesia. However, any patient needing an emergency tracheotomy does not need a local anesthetic and a general anesthetic would be fatal. Sedation should never be given in case of dyspnea due to laryngeal or tracheal obstruction.

The armamentarium of instruments consists of a knife and a pair of trained hands. A set of surgical equipment consisting of fistula bistoury, dissecting scissors, hemostat, fixation tenaculum, retractor, Trousseau dilator and scalpel should be readily available in the dentist office, should the cause arise necessitating their use. It is recommended that these be sterilized and kept in a copper box.

The position of the patient for the tracheotomy should be a supine position. The neck should be thrown into prominence by pushing a roll of fabric under the shoulders. (Fig. 2.) The layers through which one has to pass in order to expose the trachea are the skin and subcutaneous tissues, the investing fascia of the neck, the connective tissues contained in the suprasternal space

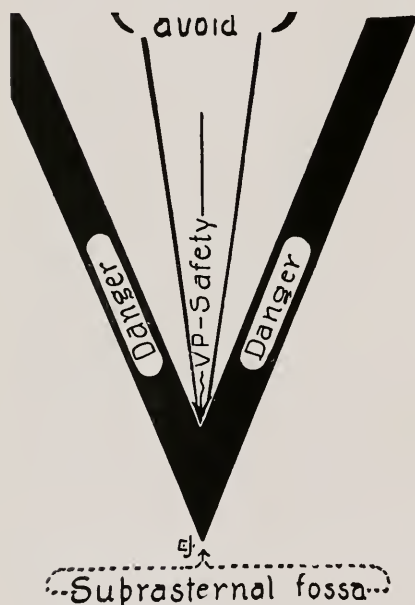


Fig. 1. Schema of practical grass anatomy. The midline of the neck is the safety line, the higher the wider. Below, the safety line narrows to the vanishing point VP. The upper limit of the safety line is the thyroid notch until the trachea is bared, when the limit falls below the first tracheal ring. In practice the trunks are pushed back under danger lines with left thumb and middle finger, thus throwing the safety line into prominence. This is generally known as Chevalier Jackson's tracheotomic triangle. (Taken from Jackson, C., "Diseases of the Nose, Throat, and Ear," page 482.)

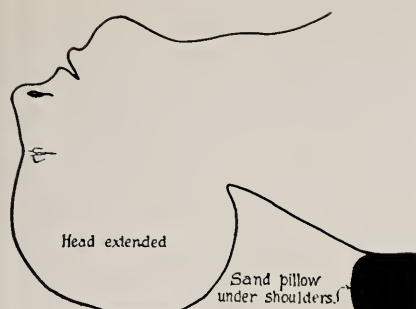


Fig. 2. Position of patient for tracheotomy. (Taken from Jackson, C., "Diseases of the Nose, Throat, and Ear," page 480.)

of Burn's, the infrahyoid fascia, and the tracheal fascia.

Dr. Jackson's Technique

In reviewing the literature in preparation for this paper, it was found that most authors turned to Dr. Chevalier Jackson for the technique and description of the technique of the tracheotomy. Dr. Jackson's⁴ description of the technique of the tracheotomy is so completely handled that a direct quote of the technique for the emergency tracheotomy will be given.

"For rapid performance it is well for the operator to ignore the details of anatomy. He should get the conception of a windpipe in the midline covered by soft tissue through which he must cut, and can cut safely so long as (1) the patient's head is not rotated, (2) the cutting is in the midline, (3) the operators left index finger is educated to recognize the feel of the trachea, (4) the trachea is thrown into prominence between the operators left thumb and middle finger. (Fig. 3 A and B.) The throwing of the trachea into prominence should

be rehearsed at every opportunity, such as on a member of the surgeon's family, a student, orderly, or a patient whose neck is being examined. It is the most important feature of this procedure.

"For clearness of description and fixation in the memory the procedure may be divided into seven steps; but in practice the steps merge

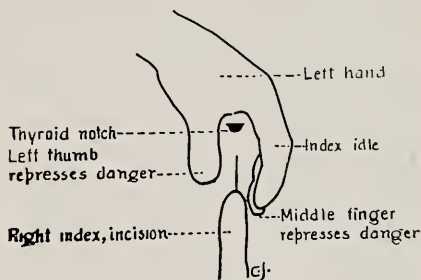


Fig. 3A. Sketch showing emergency tracheotomy by the two-incision, finger-dissection technic. The large vessels are pressed back under the respective sternomastoid muscles, with the thumb on one side and the middle finger on the other. This repression of the danger lines at the same time throws the trachea into prominence. With the notch of the obvious thyroid cartilage as a landmark the midline of the neck is slashed through skin and subcutaneous tissues at the first incision.

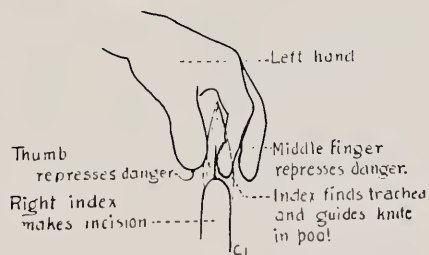


Fig. 3B. The danger lines being still repressed the previously idle left index finger burrows by sense of touch down along Adam's apple over the cricothyroid membrane and two rings of the trachea, easily felt as corrugations. The knife slides in along the palmar surface of the index finger to make the tracheal incision. This completes the emergency tracheotomy in two incisions. (Taken from Jackson, C., "Diseases of the Nose, Throat, and Ear," page 483.)

⁴ Jackson, C. and Jackson C. L., Diseases of the Nose, Throat and Ear, W. B. Sanders Company, Philadelphia, 1945, p. 483.

into each other so rapidly and smoothly that it seems but a single procedure, and it requires less than a minute.

"Step 1. Throwing the trachea into prominence and fixing it in the midline are accomplished by pushing back the great vessels well under the sternomastoid muscle. This is done in a second or two with the thumb and index finger of the left hand.

"Step 2. Initial incision. With one sweep of the scalpel an incision is made from Adam's Apple almost to the suprasternal notch. The incision must go clear through the skin to facilitate free finger dissection. There may be a considerable flow of blood but nothing immediately dangerous.

"Step 3. Finger dissection to find the trachea. While the left thumb and middle finger are still holding back the great vessels under the sternomastoids the previously idle left index finger quickly locates the trachea by following downward from the Adams Apple. The trachea is infallibly identified by the ridgy character of its walls; there is nothing like it in that region. In identifying the trachea the finger at the same time bares its midline of tissues below the cricoid, by pushing the finger down under any overlying tissue; if the isthms of the thyroid gland intervenes, it is pushed downward and elevated. If it is torn or cut, it will not matter. If an anomalous artery is felt crossing the trachea at this point, it is pushed downward.

"Step 4. Tracheal incision. The trachea having been identified and bared of tissue, the tip of the index finger is slid slightly to the opera-

tor's left side so that the scalpel in the right hand can be safely guided down along the palmar surface of the index finger into the tracheal wall. Two or three rings are incised. In making the incision, the middle finger of the right hand makes a guard against deep entrance of the knife that might otherwise go through the posterior tracheal wall into the esophagus.

"Step 5. Holding apart the lips of the tracheal incision. There is usually a hiss if the patient is breathing, but the lips of the tracheal incision in most cases lie so closely in contact that insufficient air is permitted to pass. The lips should be spread apart with a Trousseau dilator; if none is available a hemostat will do. Lacking these, the handle of the scalpel may be inserted in the slit and rotated slightly to cause gaping. Of course, some blood will trickle into the trachea but cough will quickly expel it and spray it about. The cannula is inserted with its pilot; the pilot is removed if not blown out by the tussive blast. If for any reason of deplorable lack of equipment no cannula is available someone must hold the lip of the tracheal incision apart until a cannula can be obtained or a makeshift devised for temporary use.

"Step 6. Artificial respiration must be done if there has been respiratory arrest. Oxygen mixed with 7 per cent carbon dioxide should be liberated at the tracheal opening or gently insufflated through a catheter. The best cardiac stimulant is to get oxygen into the heart muscle by way of the circulating blood. No drug is a substitute for this.

"Step 7. Hemostasis. As soon as respiration is established hemostasis may be done in the usual way. If artificial respiration is necessary, temporary hemostasis may be afforded by packing gauze firmly into the wound and around the cannula."

For the dentist who does not perform many tracheotomies during the course of his practice, in Step 4 of Dr. Jackson's description there might be added that the incision through the trachea is made at the third, fourth, and fifth rings at the midline and in long axis of the trachea.

Pitfalls and Complications

In considering the complications of the tracheotomy, the pitfalls should be considered first because they could lead to many of the complications. (Fig. 4) The general pitfalls of emergency tracheotomy are: attempt to give general anesthetic, administration of opiates, inadequate incision and laryngeal and tracheal stenosis. A dyspneic person depends largely on the aid of the accessory muscles of respiration under voluntary stimulus. This is abolished as soon as loss of consciousness begins; therefore, a general anesthetic should never be given for this operation. The contraindication of the opiates is due to the most dangerous abeyance of the motor nerve of the inferior laryngeal nerve which is an important part of the cough reflex arc and all other laryngeal muscles. By this they inhibit the natural preoral drainage by cough, tussive squeeze, and ciliary action. An incision which is not adequately long causes the operator to traumatize the tissues, and slows the operation to the point

that death by asphyxia may result. Laryngeal and tracheal stenosis is a pitfall usually resulting from a high tracheal incision. The best way to avoid this is to make the incision into the trachea downward from the third ring cutting two or three rings.

The complications that follow the tracheotomy are few if the technique is followed but variations from the technique may cause serious complications. The most common complications following a tracheotomy are subcutaneous emphysema with the extension of the infection deeply into the neck from its entrance into the tracheotomy wound, local wound infection, and hemorrhage.

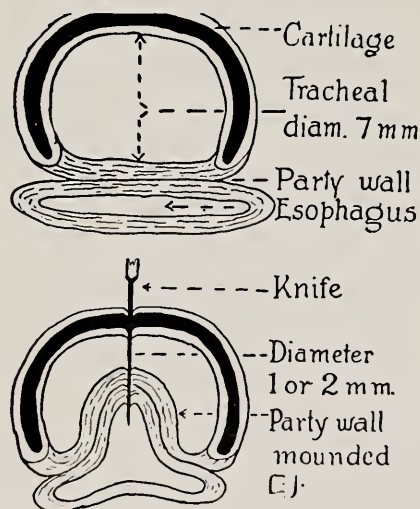


Fig. 4. Sketches showing one of the pitfalls in tracheotomy especially in children. The superior figure shows how the posterior wall of the trachea forms an integral party wall. The inferior figure shows how the cough reflex causes the party wall to mound forward against the knife and thus to perforate into the esophagus. This usually fatal disaster can be avoided by using the middle finger on the knife blade as a depth gauge. (Taken from Jackson, C., "Diseases of the Nose, Throat, and Ear," page 480.)

Probably the most important of these major complications is mediastinal emphysema with or without associated pneumothorax. The most plausible explanation of this condition is the dissection of air along the deep cervical fascia between the first and second layers with forced inspiratory effort after the neck incision and before opening the trachea. Forced expiratory effort causes the emphysematous bulb to rupture through the mediastinal pleura, thus producing a pneumothorax. The best treatment for this is prophylactic by decreasing to a minimum the length of time between the incision of the cervical fascia and insertion of the tracheotomy tube. The active treatment is repeated drawing off of air to keep the patient comfortable and free from dangerous respiratory and circulatory embarrassment.

Hemorrhage is probably the next complication of importance and this is only annoying. If the technique presented by Doctor Jackson is followed little trouble with bleeding will be present because there will be no vessels of great consequence in the area of incision. What hemorrhage is present in the emergency tracheotomy can be readily controlled by ligation. If it is not practical to ligate at the time, it could be controlled by pressure packs until ligation is possible.

The local wound infection is a complication that should be rare today with antibiotics and chemotherapy. In the emergency tracheotomy where emergency has necessitated disregard of aseptic technique, the patient should be given the advantage of prophylactic doses of antibiotics to avoid local wound infection.

The problem of decannulation is one for the laryngologist. By the time the patient is ready for this procedure the laryngologist should have been consulted; therefore, we will not take up this problem in this paper as it is of little concern to the dentist.

Conclusion

The tracheotomy should not be abused or performed promiscuously. Each case should be given most careful consideration. It is true the dentist may go through the life of his practice and never perform a tracheotomy. That remains to be seen. Regardless of the initial pathological entry when laryngeal complications with obstruction occurs producing dyspnea, a tracheotomy should be considered. The tracheotomy itself is not harmful to an individual and is a relatively minor procedure. The resulting scar can be helped later by plastic surgery. Should it be necessary to do a tracheotomy in the office, recline the chair, place a rolled coat under the patient's shoulders, not the neck, and open the airway. Practice locating the trachea at every opportunity so that it can be apprehended on a moment's notice. A periodical review of the technique performance is essential. The dentist owes this to himself, his profession and his patients. It may save embarrassment from a legal standpoint and may save the life of some patient. It may be true that the tracheotomy is not as important today as it has been in the past years because of improved techniques, advances in materia medica, and steps forward in endoscopic methods. Nevertheless, it seems likely to

retain its importance as a life saving method in spite of these advancements during recent years. Man has to come forth with many new ideas

before the 2,000 year-old tracheotomy is replaced.

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Do It Yourself!

Several years ago four dentists, in general practice in the Piedmont area of North Carolina, assembled to form a study club. That initial step was the hardest; and what followed has been the most rewarding and delightful experience in our professional lives.

There may be others who would like to know how it has worked for us and want to start their own club. We would like to encourage any two or more interested dentists to get started and see what happens. In our case, we have found that five to nine members have been the right number.

We had a moderate interest in Endodontia, and started with it being our main subject for many meetings. Then it was alternated with Crown and Bridge topics, and several meetings have been devoted to entirely different subjects. Our group now consists of nine dentists from three towns. They are graduates of six different dental schools, and range in age and experience from recent graduates to one from the class of 1916.

We need no formal officers or organization. Our dinner meetings are held every month of the year, on the last Thursday unless holidays or large meetings vary it slightly. The host, determined by alphabetical rotation, is responsible for the evening meal, the meeting place, and the program. During each meeting, the next host mentions the meeting place he intends, and confirms or changes this with telephone calls or notes about a week ahead. Any of us, finding it impossible to attend, informs him as early as possible to help with the planning. We soon learned that there were few evenings of more importance to us, and our attendance attests to that.

The meals range from picnics, cafeteria dinners, some wonderful home cooking, to full-course hotel dinners (wealthy bachelors are not a necessity as members, but we recommend them for many reasons).

Meeting places are also varied. Offices, laboratories, living rooms,

cabins, and classrooms have been very satisfactory.

Programs have not been difficult to arrange. Some sample programs are listed below. Often the unpretentious ones are wonderfully satisfactory.

(1) One person may tell or show a single technique. Example: an office procedure on a patient to show measurement and filling of a root canal.

(2) Two or more members may summarize and lead the discussion of published articles. This may not sound exciting but it can be. It not only stimulates journal reading, but also provokes some of the finest conversations that often lead to improved methods in office practice.

(3) Each individual may be assigned one or more phases of a related subject. Example: Amalgam was discussed in this fashion by the entire group, from cavity preparation to final polishing.

(4) Invited guest speakers have provided many excellent programs. These are easier to obtain than you might first think. A really interested group finds that specialists and clinicians are pleased and stimulated to discuss the problems common to themselves and the members. New areas of thinking can be explored and developed with a fine rapport for all, and the patient is the ultimate gainer by such exchanges. Example: We had an excellent discussion by periodontists on multiple splinting methods to restore missing teeth in periodontally weakened mouths.

(5) Good films can be obtained on many subjects for a few dollars

from the American Dental Association film library and other sources.

Actually, except to get some variety and to act as a focal point, the program matters less than the interest of those present. We have never had a meeting that did not wander far from the main subject. Usually, one or more of us will produce questions, study models or X-rays, for help in solving a difficult office problem. We all learned long ago to acknowledge our weak spots, and this has helped to strengthen them. A small group can do this in an informal way that seems impossible with the larger society meetings. There is a noticeable tolerance and broadened outlook that has resulted in a bond of fellowship among us that is difficult to describe. Perhaps it will mean something to you that we feel that we can refer that difficult "Mrs. Jones" to each other; or if she changes dentists without notice, an unselfconscious telephone call can bridge the gap so much better than the "slow burn" of former days.

The tangible and intangible advantages of this study club have been too numerous to list. We think we are doing better dentistry these days, with more confidence and authority. We know we have an increased income because of the better dental standards we have set for our patients and ourselves. We are sure that the interchange of ideas and ideals have been priceless. If any of you are interested, get some friends or colleagues together and—

DO IT YOURSELF!



“On the local level...”

FIRST DISTRICT

M. M. FORBES, D.D.S., Editor

The Buncombe County Dental Society was entertained by “The Asheville Dentones,” a barbershop quartet of dentists, at its annual banquet at the Asheville Country Club. Members of the vocal group are: J. W. Girard, Jr., W. E. Ryon, III, C. A. Sherrill, Jr., and Cecil A. Pless, Jr.

Three representatives of a professional management service spoke to the Society at its January meeting and new officers were installed, including: Dr. Frank E. Martin, President; Dr. Frank W. Hoyle, Vice-President; Dr. D. H. Becker, President - Elect; and Dr. C. D. Gerdes, Secretary-Treasurer.

In February Dr. E. W. Smith, oral surgeon of Kingsport, Tennessee was the guest speaker. Dr. Monte C. Miska of the UNC School of Dentistry discussed “Restorative Problems for the Aging Dentitions” at the March meeting.

The Gaston County Dental Society was entertained by the Auxiliary at the home of Dr. and Mrs. Preston R. Taylor in Belmont in December.

Dr. Joseph Matthews, Professor of Chemistry at Belmont Abbey College was the guest speaker at the January meeting of the Gaston dentists.

The Henderson County Dental Society heard Attorney Frank L. Coiner at its January meeting. Mr.

Coiner assisted the Society in the preparation of its bylaws which will be adopted at its April meeting.

The Tri-County Dental Society made plans for the celebration of National Children's Dental Health Week at its January meeting. Dr. Ervin S. Funderburk of Charlotte spoke on the use of hypnosis in dentistry.

Dr. Vaiden Kendrick of Charlotte spoke to the group on Oral Surgery at its February meeting held in Newton.

SECOND DISTRICT

C. F. BIDDIX, D.D.S., Editor

The Charlotte Dental Society, in co-operation with the Charlotte Engineers' Club, the Mecklenburg County Medical Society and the *Charlotte Observer*, is sponsoring the South Piedmont Science Fair which is to be held at Radio Center in the Queen City March 21. The annual event is a competitive exhibit of original scientific projects by high school juniors and seniors from 14 North Carolina counties.

The Davidson County Dental Society elected Dr. Reynolds Shoaf as President at a recent dinner meeting. Other officers are: Dr. A. J. Franklin, Vice-President, and Dr. J. B. Williams, Secretary-Treasurer.

The Forsyth County Dental Society will promote an educational program to combat the high incidence of decayed teeth in children

by discouraging the excessive consumption of sweets.

In December the Forsyth dentists held their annual dinner dance at the Twin City Club. In a brief business session, new officers were elected as follows: Dr. J. R. Williams, President; Dr. Harry Spillman, Vice-President; and Dr. J. O. Freund, Secretary-Treasurer.

At its February meeting Dr. E. M. Funderburk of Charlotte discussed hypnosis as an important adjunct to dentistry.

The Society at its March meeting endorsed "the authorization of a bond issue" to build a 540 bed hospital in the western section of Winston-Salem. The Society also went on record as being in favor of a special tax to "finance any operating deficit" which might occur at a new hospital.

The Rowan County Dental Society elected a new slate of officers in January. They are: Dr. Smith Kirk, President; Dr. Foy Sherman, Vice - President; and Dr. Robert Spencer, Secretary-Treasurer.

FOURTH DISTRICT

L. D. HERRING, D.D.S., Editor

The Raleigh Dental Society, January 5, elected officers for the coming year as follows: Dr. W. Penn Marshall, President; Dr. Charles M. Kistler, Vice - President; and Dr. A. W. Hargrove, Secretary-Treasurer.

The Tri-County Dental Society held its annual ladies' night in December. Dr. Charles Vardell, Dean of Music, Flora Macdonald College, presented a program of piano music. New officers for the year are: Dr. David King, President; Dr.

L. J. Moore, Jr., Vice-President; and Dr. George Stephenson, Secretary-Treasurer.

FIFTH DISTRICT

ROY A. MILLER, D.D.S., Editor

The Beaufort County Medical and Dental Society held their March meeting at the Washington Yacht and Country Club.

Dr. Fleming Fuller, Associate Professor of Obstetrics and Gynecology of the UNC School of Medicine discussed a simple technique of making examinations for cancer cells which can be done by the family physician.

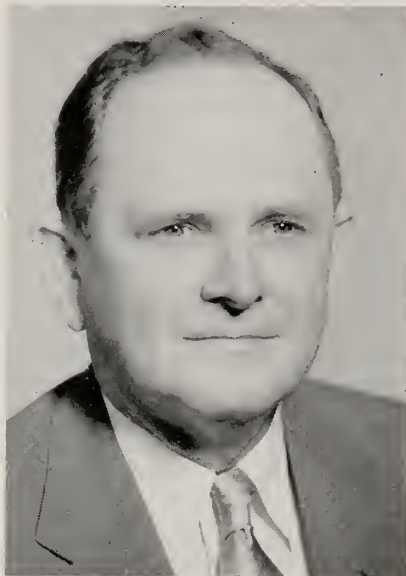
The Demeritt Pedodontic Study Club met in Warsaw in December. Guest speaker for the meeting was Dr. Glen Rasmussen, surgeon at Duplin Memorial Hospital in Kenansville. His topic was "The Hospital Operating Room and How It Can Be Used for Dental Operations."

At its February meeting in Washington, Dr. Roy Lindahl of the UNC School of Dentistry faculty met with the group and co-ordinated ideas for the presentation of a five-part clinic by a team of ten dentists at the Centennial Meeting of the ADA in New York next September.

Dr. Lindahl also appeared on the TV program "Hospitality House" which originates from Washington in the promotion of National Children's Dental Health Week.

Dr. James H. Lee of Mount Olive will be host for the March meeting. Dr. G. W. Quinn, Head of the Orthodontic Department of Duke University Hospital, will speak on "Management of the Cleft Palate Patient."

General News



Dr. Jones

Dr. Jones Candidate for Fifth District Trustee

The name of Dr. Paul E. Jones of Farmville will be presented for nomination as Trustee of the American Dental Association from the Fifth District at New York next fall. The current incumbent is Dr. Howard B. Higgins of Spartanburg, S. C., and his second term in this office will expire this year.

Some thirty supporters of the Farmville dentist met at the O. Henry Hotel in Greensboro,

March 8 to perfect a campaign organization in behalf of Dr. Jones. Dr. Walter T. McFall of Asheville presided.

Previously a letter had been sent to the 34 delegates from the Fifth District, announcing that Dr. Jones would be a candidate for the office. The letter went out over the signatures of NCDS President, S. E. Moser of Gastonia and NCDS Secretary-Treasurer, Luther H. Butler of Greensboro. Seven southern states comprise the Fifth District. Besides North Carolina they are: Virginia, South Carolina, Georgia, Florida, Alabama and Mississippi.

Drs. Claude Williams of Mississippi, Robert Thoburn of Florida and William A. Garrett of Georgia are other names in the race for the post.

Dr. Jones is well-known in North Carolina and throughout the country for his leadership and ability, not only in the field of dentistry but in many other areas. He was President of the North Carolina Dental Society in 1930-31. He served on the N. C. State Board of Dental Examiners from 1938 to 1947 and was appointed for a four-year term to the N. C. State Board of Health in 1944.

He served two terms as Vice-President of the American Associa-

tion of Dental Examiners and was President in 1946.

A member of the Fifth District, the eastern Carolina dentist has represented the North Carolina Dental Society in the House of Delegates of the American Dental Association since 1931 and was a member of the ADA Council on Legislation for six years, serving as its Chairman from 1954 to 1956.

Dr. Jones represented his district in the Senate of the General Assembly of North Carolina for five successive terms from 1949 to 1957 and was the author and sponsor of the legislation which established the School of Dentistry at the University of North Carolina.

Currently he is a member of the Board of Trustees of the University of North Carolina and is serving as a member of the Executive Committee of the Governor's Committee on Improved Courts and Court Procedures in North Carolina. Recently a new dormitory at East Carolina College has been named in his honor.

A member and deacon of the Christian Church, Dr. Jones married the former Vernice Lee Lang. They have two children, Mrs. Charles M. Duke and Dr. Paul E. Jones, Jr., three grandsons and one granddaughter.

Not since Dr. Clyde E. Minges of Rocky Mount served as Trustee of the Fifth District from 1941 until he was elected President of the American Dental Association, has a North Carolinian served as a Trustee from this District.

UNC Dean Honored

Dr. John C. Brauer, Dean of the UNC School of Dentistry was elected to honorary membership in the Academy of General Dentistry which met at Chicago in February. The Academy emphasizes the importance of post-graduate study by dentists.

Dr. Brauer was one of fifteen dental school deans similarly honored by the Academy.

Dentists gathered at the O. Henry Hotel in Greensboro March 8 to organize campaign in behalf of Dr. Paul E. Jones of Farmville as candidate for ADA Trustee from the Fifth District.



Nine Dental Assistants To Graduate

The end of May marks the completion of the second class in dental assisting at the UNC School of Dentistry. Nine girls will finish the course and seven will be seeking employment in the offices of private practitioners, according to Dr. Kermit Knudtson, general supervisor of the course for dental assistants at the University financed by the United States Public Health Service.

These girls have had a three-month intensive course in all phases of dentistry through lectures, laboratory procedures and demonstrations. In addition, they have experienced nine months of chairside assisting with the junior and senior dental students.

Dentists interested in employing these girls should write Dr. Knudtson at the UNC School of Dentistry, Chapel Hill.

Dentist Surprises Burglar

Dr. D. L. Pridgen surprised a burglar standing in the doorway of his second-floor bedroom at his Fayetteville home at five o'clock in the morning March 7. He called to his wife to bring his gun and the intruder fled down the steps and lost no time in making his getaway.

More Support Urged For UNC Health Center

Dr. Henry T. Clark, administrator of the UNC Division of Health Affairs has warned that although the size of the student body of the division is steadily growing and operating costs are constantly on the increase, the Governor's Advisory Budget Commission had not recom-

mended needed increases in the division's budget for the next biennium.

The Division of Health Affairs includes the UNC Schools of Dentistry, Medicine, Nursing, Pharmacy, Public Health and the N. C. Memorial Hospital.

In round figures the present budget of the Division is 10 million dollars. About 35 per cent of this money comes from state appropriations. Approximately half of the remainder comes from hospital fees and tuition charges and the other half is accounted for by grants and gifts.

Two N. C. Towns To Vote On Fluoridation

Residents of Aberdeen and Mount Holly will go to the polls May 5 to vote on the fluoridation issue.

In Aberdeen, the movement has the endorsement of the town board and the Mayor, Dr. E. M. Medlin, local dentist. Three thousand dollars was budgeted for fluoridation in this fiscal year, but Mayor Medlin reported that the installation of equipment would cost considerably less. He estimated the cost of installation would run from \$1,400 to \$2,000 and the operational expense would be less than \$1 per day and would not increase taxes or water bills.

Keels Heard By Civitans

Dr. Cameron H. Keels of Morganton was guest speaker at the local Civitan Club March 5. He showed slides and gave a commentary on his trip to the Antarctic and the South Pole with the Admiral Byrd expedition while in the Naval service.

Keogh-Simpson Bill Approved by House

The Keogh-Simpson Bill (H.R. 10) was passed overwhelmingly by voice vote March 16 in the House of Representatives. The bill has been sent to the Senate where it is expected to meet strong opposition from the Senate Finance Committee, headed by Senator Byrd (D., Va.), and the Treasury Department.

The bill would permit a dentist or any self-employed person to defer income tax each year on a portion of his own income to provide for retirement. It is estimated that it will affect a surprisingly large number of people. According to the American Thrift Assembly some 10,000,000 people are now being penalized by present tax regulations. The bill would remove some of the inequities in the tax structure.

Representative Charles R. Jonas (R., N.C.) predicts "a long rocky road ahead before it becomes law."

In a recent letter Mr. Jonas stated: "Everyone seems to favor the bill in principle but misgivings are freely expressed concerning the timing. If the bill becomes law, it will result in a substantial loss of revenue, estimated at \$365 million in a full year's operation, and this is exceedingly difficult to justify at a time when the government faces a budgetary deficit of \$12 billion this fiscal year. Of course some of this revenue loss will be recaptured in later years when beneficiaries begin to withdraw funds from their previous programs."

The ADA urges dentists to write their Senators urging them to support H.R. 10; and to encourage friends who are also self-employed to express themselves on this legislation.

Correction

The March *Newsletter* incorrectly referred to an article, on "Expansion of Benefits Under Association Group Insurance Programs," as appearing in the February 1959 issue of the *ADA Journal*. The article actually appeared on page 124 of the January 1959 issue of the *ADA Journal*.

Dentists are requested to read this article, which gives the details and requirements, as well as the premium schedules, of the two ADA sponsored insurance programs which expanded their benefits effective January 1, 1959.

Members under age 60 who are currently insured are being given an opportunity to increase their basic life insurance benefit from \$10,000 to \$20,000. The peak monthly benefit from the ADA Accident and Health Plan has also been increased from \$400 to \$500 or \$600. Members currently participating in this program who desire to receive higher monthly benefits will be required to execute a new application in order to establish their insurability.

Institute on Hospital Dental Service Set

Dentists interested in learning more about dental care in hospitals are invited to attend the third annual Institute on Hospital Dental Service to be held in San Francisco, May 18-21, at the Sheraton-Palace Hotel.

Among the subjects on the program will be orienting the dentist to hospital procedures, providing dental service on an out-patient basis, and participating in prepayment plans. There also will be a

tour of the comprehensive dental service in the Public Health Service Hospital in San Francisco.

The institute is being conducted by the American Hospital Association in co-operation with the American Dental Association. The American Medical Association is a co-sponsor.

An early enrollment is urged because the institute will be limited to 125 participants. Members of dental and medical staffs of hospitals and hospital administrators will be among those in attendance.

Information and application forms may be obtained from the A.D.A. Council on Hospital Dental Service, 222 E. Superior St., Chicago 11.

Dr. Gerard J. Casey, secretary of the Council, said 2,323 of the nation's 7,000 hospitals now have dental facilities.

Admiral Malone Retires

Rear Admiral Ralph W. Malone, Dental Corps, U.S.N., a native of North Carolina and a former member of the North Carolina Dental Society, retired from the U. S. Navy November 1, 1958 after thirty-two years of continuous active service. Admiral Malone was Assistant Chief, Bureau of Medicine and Surgery, and Chief, Dental Division, Bureau of Medicine and Surgery, Navy Department, at the time of his retirement.

Retirement ceremonies were held in the office of Rear Admiral Bartholomew W. Hogan, Surgeon General of the Navy on October 31, 1958.

At its 102nd Annual Session, The

North Carolina Dental Society paid special tribute to Admiral Malone for his distinguished service.

Chatham Dentist Honored

Dr. Mott P. Blair of Siler City was selected as one of the three outstanding young men of the year by the State Junior Chamber of Commerce. Dr. Blair was cited for his work in spearheading fund-raising drives for Christian Education in the state, for the Siler City Industrial Corporation and a new municipal airport.

The awards were presented at a banquet meeting of the Jaycee's Third Quarterly Board Meeting held in Durham, February 21.

Others receiving the distinguished service awards were Winston-Salem textile executive R. Philip Hanes and Raleigh banker Lewis R. Holding.

Periodontists Meet At Gatlinburg

Gatlinburg, Tennessee will be the scene of the annual meeting of the Southern Academy of Periodontology June 11 and 12. North Carolina dentists and their ladies have been extended a cordial invitation to attend the two-day session which will be held at the Riverside Hotel.

Dr. W. P. Drew of Brunswick, Georgia advises that reservation can be made by writing the hotel direct. Record attendance is expected and dentists are urged to make their reservations as early as possible.

Dr. L. F. Bumgardner of Charlotte is serving as President of the Academy this year.



New roles of responsibility in the Buncombe County Dental Society were assumed by several members in January. Pictured above are, left to right: seated, Dr. Frank E. Martin, President; Dr. Frank W. Hoyle, Vice-President; standing, Dr. C. Don Gerdes, Secretary-Treasurer; Dr. F. S. Cunningham, retiring President; and Dr. D. H. Becker, President-Elect. Dr. H. M. May, Chairman of the Executive Committee was absent when the picture was made.

Budget of State Board Cut

In a statement released March 3 the State Board of Health labelled the public health budget recommended by the Advisory Budget Commission now before the General Assembly as "inadequate to meet increasing health needs of our people."

The State Board had requested \$2,284,544 for new health programs expansion and improvements and aid to local health departments. This was in addition to its request for \$6,079,378 for the continuation of existing services.

The Advisory Budget Commission recommended a total budget for the Board for the 1959-61 bien-

nium of \$6,054,377. Actually this represented an increase of 1.1 per cent above appropriations for the 1957-59 biennium to take care of Merit System Increments which are provided for all departments. However, State Health Director J. W. R. Norton pointed out that when the amount of these increments is deducted from the 1957-59 appropriation and from the 1959-61 recommendations, the result is an actual decrease of \$27,017 in the recommendations for the 1959-61 biennium.

Commenting on the health service cut, an editorial in the *Raleigh News and Observer* states that: "Unless the General Assembly

raises the appropriations in the budget and raises them sharply. North Carolina will sink lower in per capita expenditures and the counties will be required to pay even more of the State's share of maintaining local health departments."

UNC Schedules Clinic June 2-6

The Department of Periodontology and Oral Pathology of the UNC School of Dentistry has announced a five-day post graduate course in the diagnosis and treatment of periodontal diseases and the differential diagnosis of oral lesions June 2-6.

Staff members will give lectures, demonstrate techniques through closed circuit TV, and supervise clinical work of participating dentists. Each participant will have the privilege of bringing a difficult case with him or study models and X-rays for consultation, diagnosis and treatment planning.

Guest lecturer for the course will be Dr. Gilbert J. Parfitt, Professor and Head of the Department of Periodontology at the University of Alabama School of Dentistry.

10th National Dental Health Conference

The Tenth National Dental Health Conference will be held April 27-28-29 at headquarters of the American Dental Association in Chicago.

Four areas have been selected for consideration at this year's con-

ference, according to Dr. J. H. Eshleman, Chairman of the Association's Council on Dental Health. They are: (1) dental health education in the school curriculum, (2) clinical dental programs in state and county institutions, (3) effective utilization of auxiliary dental personnel and (4) issues involved in the group purchase of dental care as a part of the employer-employee relationship.

Problems associated with the controversial Medicare Program, will be a part of the fourth discussion area. Last November the ADA House of Delegates meeting in Dallas returned to the Councils on Dental Health, Federal Dental Services and Legislation and the Bureau of Economic Research and Statistics a joint report prepared by those agencies outlining a policy statement on Medicare.

Obituaries

Dr. Samuel Horace McCall, 74, an ADA and State Life Member of the Third District, died in Troy, March 4, 1959.

Dr. Jasper W. Stanly, an ADA Life Member of the Fifth District, died in Wilmington, December 25, 1958.

Dr. Joseph C. Watkins, 85, an ADA Life Member of the Second District, died in Winston - Salem, January 5, 1959.

AUG 13 1959 PROCEEDINGS ISSUE

103rd Annual Session

Pinehurst, North Carolina

May 3-6, 1959

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APPENDIX

Code of Ethics, North Carolina Dental Society, 1959



Dr. S. Everett Moser, retiring President, turns over the gavel to Dr. W. B. Sherrod of Winston-Salem, who will serve as the Society's 85th President in 1959-1960.

**DIRECTORY OF MEMBERS, OFFICERS, AND COMMITTEES
BEGINS ON PAGE 313**

**CODE OF ETHICS
NORTH CAROLINA DENTAL SOCIETY
REVISED 1959
SEE APPENDIX**

Resolutions

JOHN CHARLES BRAUER, A.B., M.Sc.,
D.D.S., F.A.C.D.

SANDY COLE MARKS, A.B., D.D.S.
S. EVERETT MOSER, D.D.S.

JOHN CHARLES BRAUER, A.B., M.Sc., D.D.S., F.A.C.D.

WHEREAS, This year will mark the tenth year in which Dr. John Charles Brauer has served as the Dean of the School of Dentistry of the University of North Carolina, and

WHEREAS, During these ten years the Dental School has contributed so much to the health of the people of North Carolina, and

WHEREAS, This contribution on the part of the Dental School has been due in large measure to the inspiration, zeal, devotion and energetic leadership of Dr. Brauer, his faculty and staff, and

WHEREAS, The School of Dentistry of the University of North Carolina has attained unparalleled stature among the dental schools throughout the nation; Now, therefore be it

RESOLVED, That the North Carolina Dental Society does hereby express our sincere thanks and appreciation to Dr. John Charles Brauer for his achievements in behalf of the dental profession, and be it further

RESOLVED, That this resolution become a part of the Proceedings of the North Carolina Dental Society at its 103rd Annual Session, May 3-6, 1959, at Pinehurst, North Carolina.

Adopted by the House of Delegates May 6, 1959.

SANDY COLE MARKS, A.B., D.D.S.

WHEREAS, In response to the noble Christian call which Dr. Sandy Cole Marks accepted, and which caused him to leave a successful practice in Wilmington in 1948 to become a dental missionary in the Belgian Congo, and

WHEREAS, By his devotion to God, through sacrifice, work and love for his fellow men in the cause of dentistry for the Congolese people, and

WHEREAS, Through these efforts he has established the first school of dentistry in the Belgian Congo; Therefore, be it

RESOLVED, That we assure him of our continued prayers for the welfare of his family and himself, and for Divine guidance, and be it further

RESOLVED, That the North Carolina Dental Society express to Dr. Sandy Cole Marks our sincere thanks and wishes for his continued success in his chosen field of service to humanity, and be it further

RESOLVED, That we pledge to him as individual members, according to the dictates of our consciences, our financial and material support, and be it further

RESOLVED, That this resolution become a part of the Proceedings of the North Carolina Dental Society at its 103rd Annual Session, May 3-6, 1959, at Pinehurst, North Carolina.

Adopted by the House of Delegates May 6, 1959.

S. EVERETT MOSER, D.D.S.

WHEREAS, Dr. S. Everett Moser has rendered unselfish and outstanding service to people in general through his unselfish service to the North Carolina Dental Society during his tenure of office as President-Elect and President, and

WHEREAS, Dr. Moser has been a life-long member and tireless worker in our Society, and

WHEREAS, He has, through his well-rounded activities, brought favorable influence and stimulæ to bear upon the life and conduct of people in general within his radius of influence; Now, therefore, be it

RESOLVED, That the North Carolina Dental Society express its recognition and appreciation of Dr. Moser's services by placing this resolution in the Proceedings of the North Carolina Dental Society at its 103rd Annual Session, May 3-6, 1959, at Pinehurst, North Carolina, and furnishing his family with a copy of this expression of our gratitude.

Adopted by the House of Delegates May 6, 1959.



Mrs. Sandy C. Marks, Dr. Marks and Mrs. W. B. Sherrod greet guests at the Reception.

Report of the President

S. EVERETT MOSER, D.D.S.

Gastonia, North Carolina

May 4, 1959



DR. MOSER

Dr. Teague, Members of the North Carolina Dental Society, Distinguished Guests, Ladies and Gentlemen:

It is my privilege and pleasure to extend to each of you a most cordial welcome to the 103rd Anniversary Meeting of the North Carolina Dental Society.

The officers and committeemen have labored unceasingly to make this meeting outstanding in every detail. It is their sincere hope that everyone in attendance will find the scientific program most interesting and educational, and the social events thoroughly enjoyable.

Within the past few years dramatic developments have occurred in dentistry, notably in specific methods of treatment. Never before in the history of our profession has our responsibility been so great. Equipped with many new technological advances and therapeutic weapons, we are in a position to do more good, as well as more harm, than ever before. Only by the process of self-education can we best fulfill our obligation in caring for our patients. I am confident that it was with this philosophy of graduate self-education in mind that brought you to this meeting.

My friends, one year ago I stood here, your newly elected President, and stated that I was fully aware of the magnitude of the responsibilities of this office. I now call your attention to Goethe's pertinent observation: "There is nothing more frightful than ignorance in action." One year ago, I did not have a real appreciation of the attendant duties and responsibilities of this office. Now I do! The education gained during the past year has been rich and rewarding even though I have fallen far short of my goal. I have greatly enjoyed this period of service and have prized the privilege of trying in my humble way to add to the effectiveness of this organization. I have honestly tried to discharge my duties to the best of my ability. I can only hope that I have made some approach to the ideal of a good President.

During the year two of our former Presidents have gone to their re-

ward. I refer to Dr. J. C. Watkins, who served as President in the year 1909-1910, and Dr. Ernest A. Branch, who served as President in the year 1933-34.

It is a life that impresses, and words of eulogy spoken afterwards are most ineffective. It takes a life to create an impression, and words fitly spoken seldom, if ever, deepen that impression. The fallen withered petals lying on the earth underneath the rose bush tell us nothing of the beauty of the rose that once blossomed there in all of its purity. The dissipated elements of the fallen star tell us nothing of its beauty as it shot through the heavens on its downward course. We can but remember the beauty of the rose and the attraction of the fallen star. These impressions are the lasting impressions.

And so it is with these departed professional brothers. Dr. Watkins had been inactive for several years, but Dr. Branch was active up until the last few months of his life. Dr. Branch lived the lesson so ably taught by the Galilean Master, who one day set a child in the midst of a great company and said, "of such is the Kingdom of God . . . and whosoever shall offend one of these little ones, it were better for him that a millstone were hanged about his neck and he were drowned in the depth of the sea." I think it is safe to say that no man in our profession contributed as much to children's dental health education as did Dr. Branch. He lectured throughout our State on the relationship of dental health to general health. He emphasized the important role which dental infection and oral sepsis play in the causation of systemic diseases among our children. He recommended in every conceivable way the addition of sodium fluoride to public water supplies as a public health measure for the partial control of dental caries. As a result, the babies born today in some thirty communities in North Carolina, have an infinitely better opportunity to live because of his fine public health service, and the children have a better opportunity to grow, to play, to study, to work, and to win success than would have been possible had Dr. Branch not passed this way.

Dr. Branch and Dr. Watkins were pioneers in many respects. The power and prestige which the North Carolina Dental Society now enjoys reflect so greatly the loyalty and the devotion of their great talents to its cause. I hope that you will pardon me for taking this time in paying an humble tribute to these great men.

During my term as President-Elect and also as President, I attended all District Society meetings for the two years. These visits afforded me the opportunity to get a clear picture of the problems at the District level. I found the officers and members of the various districts imbued with the real organization spirit plus a personal determination that all objectives would be reached. This year all past attendance records were broken at each of the five meetings. As a matter of fact, it no longer seems difficult to attract a large attendance at the district level provided the programs are of the highest order. I congratulate the officers of the five districts for their outstanding efforts.

I shall not discuss at any great length the work that has been accomplished during the year. However, I urge every man of you who is interested in his profession to attend the sessions of the House of Delegates this week and become better informed concerning the various problems presented in committee reports.

THE CENTRAL OFFICE

In recounting our progress during the past year no report would be complete without paying a tribute to our staff of efficient, loyal people who so capably conduct the affairs of our organization at the Central Office. The many opportunities I have had to observe this staff performing their manifold duties make me even more proud to have been associated with them. I have a special word of praise for our Executive Secretary, Mr. A. M. Cunningham. He has a great capacity for organizational planning. His counsel, direction and advice to the state officers,

district officers and committeemen regarding their several organizational duties have demonstrated his sagacity on many occasions. The office of president is made much easier through his assistance.

RECOMMENDATIONS: None.

THE EXECUTIVE COMMITTEE

The Executive Committee, with Dr. Norman Ross as chairman, held seven meetings during the year. These unselfish and dedicated individuals have spent many hours of their time, often at great personal sacrifice, in transacting the business of the North Carolina Dental Society. They have deliberated and discussed the many problems that vitally concern and affect the Society at this time and in the future. It is my considered opinion that their decisions have been wise, farsighted and for the best interest of the organization. Time has never been a rigid factor in their deliberations of the problems at hand.

To each member of the Executive Committee I extend my personal thanks for the guidance, help and counsel given me during the year. It has been a great privilege to have been associated with men of such stature and high ideals.

DEVELOPMENT FUND

On September 16, 1956, the Executive Committee created a Development Fund for the purpose of "financing the purchase of property and the erection of a building to house the Central Office at some future date." You will recall that as an initial gift to this project the Past Veterans' Association donated \$743.30.

In the original motion establishing the fund it was provided that 5 per cent of income from dues would be transferred from the General Fund to the Development Fund each fiscal year, "if possible and feasible and subject to the approval of the Executive Committee." As a result of this provision, \$1,000.50 was added to the fund at the end of the fiscal year 1956-57. The balance on hand in this fund now amounts to \$3,072.58.

There were no disbursements for the year and all of this money is on deposit with the First Federal Savings and Loan Association of Durham drawing 3½ per cent interest.

In the not too distant future it is hoped that the North Carolina Dental Society will have a "home of its own," and a central office building of which it will be proud. It will stand as a symbol of progress and its usefulness will make a great contribution to our organization. It would conceivably house the administrative offices of the Society, with adequate facilities for the proper storage of business and historical records, and provide adequate and suitable space for committee meetings and conferences of moderate size.

Those of you who have attended committee meetings at the Central Office are well aware of the critical need for additional space and facilities if the most effective work is to be done. There are times when two or more committee meetings are scheduled to meet in Raleigh on the same day, but because of inadequate facilities the Central Office can accommodate only one conference at a time.

If for no other reason, such a building would be a long-range economy measure which would greatly benefit future generations of dentists and afford them an even greater opportunity to expand the work and the service of the Society. After all, as long as the Society pays rent for its offices all it has to show for it is a cancelled check.

RECOMMENDATIONS: That the Executive Committee be authorized to explore the real estate market to locate a suitable lot for the Central Office Building. Should a good piece of real estate become available, and the assets of the Development Fund prove not to be sufficient, provisions should be made to allow the Executive Committee to borrow from the reserve in the General Fund and/or possibly the Relief Fund.

DISTRICT OFFICERS' CONFERENCE

During the past year, forty district and state officers and their guests attended the Sixth Annual District Officers' Conference at Sedgefield Inn, Greensboro. The week end program included: special training schools for district secretaries, editors and other executive officers; panel discussions on district society activities and projects; a Workshop on Ethics; and two business sessions.

The growing interest in these District Officers' Conferences was evidenced by a substantial increase in the attendance over that of last year. These conferences are planned primarily for the district officers, but any interested members of the Society are always welcome.

RAISE IN DUES

The cost of everything is increasing—food, clothing, utilities, dental supplies, dental equipment and services of all kinds. The same is equally applicable to the operation of a dental society. Not only are things costing more, but as our membership increases, more services are being demanded and added each year.

Presently the annual dues of the North Carolina Dental Society are \$25.00. Last year (1957-58) the cost per member to operate our Society was \$29.21. In other words, each member received a dividend in services of \$4.21 or almost a 20 per cent return for the money he expended. Where else can one get a bargain like this these days?

Actually the return was even greater if you were to base figures on the number who actually paid state dues. On December 31, 1958, the membership totalled 1,047. Of this number 859 paid state dues. There were 115 state life members, 51 ADA life members and 22 in the military service, for a total of 188 who paid no state dues. Almost 20 per cent of the total membership of the Society paid no dues.

By comparison, the average annual dues of the 54 constituent societies of the ADA is \$24.34. The dues range from \$3.00 to \$100.00 annually. The dues of 22 societies (including North Carolina) are \$25.00 or more, which is another way of saying that the dues of 22 societies are above the national average. Incidentally, North Carolina barely falls in this category.

Increased activity and demands for services on the Central Office have necessarily brought higher operating costs. The inflationary trend which is still continuing has increased postage rates and the cost of equipment and supplies of all kinds.

There are some things that are absolutely essential for a society to be effective and modern. One particularly is the employment of legal counsel on an annual retainer basis. According to one authority it is dangerous for a dental society to attempt to operate an active program without the benefit of competent legal counsel. To retain legal counsel for individual projects or problems is an expensive procedure. During the year the Legislative Committee had occasion to investigate the cost of employing legal counsel to assist the Committee in its efforts to have the state insurance laws amended so as to make it mandatory that insurance companies pay dentists directly for services rendered under Blue Shield hospital insurance plans. The Committee received estimates ranging from \$3,500.00 plus expenses of \$200.00, to \$5,000.00 plus expenses of \$500.00 to \$2,500.00. With the growth of membership and expansion of programs it would be a long range economy measure to retain legal counsel on an annual retainer basis.

As I talked to members all over the state during my tour of districts for the past two years, I was given the impression that they are becoming more and more conscious of the real value of the North Carolina Dental Society and the American Dental Association—that they are not willing to see a curtailment of our activities, but are ready and willing to endorse an expansion of our program. We are receiving so much for so little from the North Carolina Dental Society and the American Dental Association.

RECOMMENDATION: I, therefore, without any hesitation recommend that

the dues of the North Carolina Dental Society be increased from \$25.00 to \$35.00 beginning January 1, 1960.

FLUORIDATION

The Committee to Protect Our Children's Teeth, Inc., a New York City organization headed by Dr. Benjamin Spock, has called fluoridation one of the surest public health advances of our time. Medical, dental, public health, scientific, engineering, and many other organizations — not only of this country but world-wide — strongly endorse and recommend fluoridation. Similar organizations throughout our own state are solidly in support of fluoridation.

But all this does not appear to affect the fears created by a militant minority who scream "poison" and say that fluoridation may be harmful to some people.

In my own town of Gastonia, for example, the Dental and Medical Societies and the County Health Department petitioned the City Council to fluoridate the water supply. Everything went smoothly for about six months. Suddenly our local paper, *The Gastonia Gazette*, came out with a few editorials screaming "rat poison" and all that sort of nonsense. People began to lay all sorts of complaints to the effect of fluoridation — dizziness, loss of memory, pain in a certain finger of one hand or the other, nausea, inability to sleep, etc. Council members were bombarded by telephone calls in the wee hours of the night. But none of these calls were ever run down and checked.

The Mayor stopped fluoridation service to prevent the Council from voting it out.

Since the termination of this service, an organization known as the Gaston Better Health League, Inc., has been formed. The League states in its papers of incorporation the promotion of health education, medical, and dental research as objectives. The League has furnished medical, dental, and lay speakers who appeared before PTA's civic clubs, merchant groups, book clubs, women's organizations, church groups, and others. American Dental Association approved movies, slides, and pamphlets were used to supplement the lectures.

These groups and organizations, with the exception of one or two groups that do not approve any venture that the organization itself is not sponsoring as a project, passed resolutions approving fluoridation and petitioning the City Council to reinstate the service. Copies of these resolutions were furnished the City Council and *The Gastonia Gazette*. But these educational efforts and all the irrefutable facts on which fluoridation rests have apparently had no effect on our City Council and certainly have had no restraining results on our newspaper's adamant stand against fluoridation.

I have cited a local situation at some length because of my first-hand knowledge of it and we are aware that the power of the anti-fluoridationists in Gastonia is not an isolated instance. Greensboro, Raleigh, Durham and Statesville are other examples.

Fluoridation is one of the safest, most valuable, and most economical public health services of our time; but at its present rate of acceptance it will be far from universally employed during the lifetime of the present generation.

It now appears that we need a militant majority for fluoridation. The people who know and accept the scientific facts on any public health service are usually a non-militant majority, while a militant minority hinder and retard the service until many times it has become necessary to apply the service by process of law.

Perhaps the A.D.A. could find ways and means of giving wider publicity to the value of fluoridation. State and local dental, medical, and health organizations can give stronger support to the service by finding additional methods of impressing the public with the importance of fluoridation. The U. S. Public Health Service, through the Department of Health Education and Welfare, is planning an all-out educational program on the value of fluoridation. This could easily become the power

needed to bring about a nation-wide move toward universal fluoridation.

One thing is certain—you and I as individual dentists can be of tremendous value in promoting fluoridation. We look into these little mouths, badly diseased, and have the closest and most influential opportunity to drive home to these young parents the great service that is now available for these citizens of tomorrow through fluoridation.

RECOMMENDATION: That we continue our fight for fluoridation as a public health measure.

THE DENTAL PROFESSION AND THE DENTAL LABORATORY GROUP

First, I would like to commend Dr. Fred Hunt for his timely article on this subject which appeared in the January issue of the *JOURNAL*. Dr. Hunt is a member of the Council on Dental Trade and Laboratory Relations of the American Dental Association and is rendering an invaluable service to our profession in this capacity.

A situation has arisen in several states which is cause for grave concern to all who are interested in seeing that the dental care of the American people is provided only by those who have met full professional qualifications. I refer to attempts by a small but vociferous group of laboratory technicians to win the legal right to deal directly with the public in rendering complete prosthetic dental service. In Illinois a group called "The Independent Dental Laboratories Association" was given a hearing last year by a state legislative committee on the subject of proposed legislation to license "Public Denturists." Similar groups have been active in Idaho, Washington, Oregon, Nevada, Oklahoma and Georgia. In Idaho, the Supreme Court declared unconstitutional parts of the dental practice act and, as a result, permitted unlicensed persons to perform certain prosthetic dental services for the public. The Idaho State Dental Association has rewritten the dental practice act and is now anxiously awaiting a decision by the Supreme Court to determine its constitutionality. Thus far, "Public Denturist" bills have been introduced in four state legislatures. In Georgia, the bill was defeated by the unanimous vote of the Hygiene and Sanitation Committee of the House of Representatives on February 12 after representatives of the Georgia Dental Association and the State Dental Laboratories Association testified against it as "detrimental to the health and welfare of the people of this state." Could this happen in North Carolina?

A "Public Denturist" would be authorized, if these groups had their way, to advertise and take impressions for full dentures, partial dentures, and repair dentures, dealing directly with the public. It should be emphasized here that the great majority of dental laboratory owners and dental laboratory technicians adhere strictly to the legal and ethical standards which govern their activities. In a formal statement approved in October 1957 by its House of Delegates, the National Association of Dental Laboratories declared its purposes to include the following: "To uphold and advance the dignity, honor and efficiency of those engaged as operators of dental laboratories, to advance their standards of service to the dental profession, and to establish co-operation among its members . . . by encouraging strict adherence and compliance with all laws relating to the regulation of dental laboratory technology and assisting in the adoption of new laws whenever they appear necessary to promote the best interest of the public health and welfare. . . ." Incidentally, the Independent Laboratories Association (an Illinois corporation) has not made its membership public.

These problems have arisen because some few dentists have not been willing to assume all the responsibilities that go along with their professional status. These dentists have sent their patients to the laboratory for adjustments and repairs, matching shades for porcelain restorations and bridges, thus encouraging some technicians to aspire to professional status, and at the same time leading the patient to develop ties with the technician. It is only natural for the patient to go directly to the technician the next time he has trouble with his denture. The result is that

on this later visit he is seen only by a man who is skilled in the mechanical process of making and repairing dentures, but who has no training in recognizing certain pathological conditions of the oral cavity.

Section 90-22 of the General Statutes reads in part as follows: "The practice of dentistry . . . is hereby declared to affect the public health, safety and welfare and to be subject to regulation and control in the public interest. It is further declared to be a matter of public interest and concern that the dental profession merit and receive the confidence of the public and that only qualified persons be permitted to practice dentistry. . . ." We, of all people, should be the last to encourage others to practice dentistry without qualifications and without a license. And yet, I am afraid some dentists in North Carolina do just that.

My friends, I say to you that it is the duty of each of us to maintain legal and high ethical standards in our relations with the laboratory craft. Actually, any breach of the legal standards of professional conduct should be reported to the Ethics Committee.

I have not heard of any attempt by laboratory technicians in this state to secure statutory right to deal directly with the public. However, the experience of one state tends to be repeated in other states. We should expect such activities and begin to prepare for them.

RECOMMENDATIONS: None (Committee Report carries recommendations).

SCHOOL HEALTH CO-ORDINATING SERVICE

Dr. S. B. Towler and his Advisory Committee to the School Health Co-ordinating Service Committee were burdened with the duty and responsibility of "eliminating as many undesirable features of the program as possible and to include more services required by school-age children; and to see that the present schedule or list of services be changed and re-worded so as to specify the exact service to be given for a listed fee." Dr. Towler and his committee have had two lengthy meetings during the year and, in addition, he has made innumerable automobile trips and made a myriad of telephone calls for the purpose of working out a program which would be acceptable to both the North Carolina Dental Society and the State Board of Education. Just how acceptable, you shall be the judge, when you hear the report given to the House of Delegates. The report includes a fee schedule which has been approved by the Executive Committee.

Back in 1949, the North Carolina General Assembly made available to the State Department of Public Instruction \$550,000.00 to be administered by the School Health Co-ordinating Service. These funds were to be used for the correction of physical defects among school children who, after being carefully screened by school and health department personnel, would be classified and certified as indigent or underprivileged. During the 1955 session of the General Assembly the appropriations for the biennium were reduced in the amount of \$250,000. It is my understanding that plans are in the making to ask the Legislature now in session to appropriate some colossal amount of money for future expansion of this program. If this plan is consummated, we will really be practicing socialized dentistry and medicine in North Carolina.

During the fiscal year 1958-59 the allocation of school health funds to the three school units of Gaston County was approximately \$10,000. This amount was divided among the units on the basis of average daily attendance. Prior to 1957-58 about 90 per cent of these funds were returned unused to the State Department of Public Instruction. However, since the money was available, and since there were children of indigent parents who were in need of dental care, the Gaston County Dental Society agreed to see these children and render needed services for the fees set by the School Health Co-ordinating Service.

In 1958-59 there have been so far 191 children seen and given dental service. The average cost was \$36.90 per child with extremes of \$2.40 to \$198.40. The total expenditure for dental services has been \$7,048.00.

The money allocated to Gaston County was completely gone by February 2, and there are \$1,400.00 in unpaid dental bills awaiting further appropriations. Since these funds are limited and since such a small number of children were seen, there may well be a question of the wisdom of using the money for the purpose of correction. It is felt that if the money allocated for school health purposes were used for educational work and were more in line with the programs and philosophy of the Division of Oral Hygiene, the goal of better dental health for all children of my County and the State of North Carolina would be a good bit closer than it is at the present.

I wish to commend Dr. Towler and his committee for their prodigious efforts to solve the many problems associated with this difficult assignment.

RECOMMENDATIONS: None.

RELIEF FUND

During the year there were four individuals who received financial assistance from our State Relief Fund with a total expenditure of approximately \$1,700.00. Two applications for relief grants are now pending.

The success which the Relief Fund has had during the past six years is due to the loyal support given by the Dental Auxiliary in the collection of scrap amalgam. May I remind you again that since the good ladies of the Auxiliary adopted this project some six years ago they have raised almost \$10,000. This is a remarkable record and it is all the more reason why we should support the Amalgam Scrap Drive year after year. Through the donation and sale of amalgam scrap, there is provided a method whereby every member of the Society may feel that he has a part in this worthy project. Members of the Society who have not regularly contributed their amalgam scrap to this humanitarian fund may not know that actual relief is being dispensed to their stricken colleagues, but consideration for the feelings of the recipients forbids the publication of their names. And this is as it should be.

"No one knows when or whom the cross-winds of adversity may strike." "Those who are the givers of today may be among the recipients of tomorrow."

I wish to express my deep appreciation to the Auxiliary, and to Mrs. J. Walton Branham who headed the Amalgam Scrap Drive, for their outstanding contribution and continuous support to this benevolent plan. In addition, I commend Dr. J. T. Lasley and his committee who have done yeoman service in the administration of this fund.

RECOMMENDATIONS: None.

DENTAL MANPOWER IN NORTH CAROLINA

A critical review and evaluation of the dental manpower needs of the State of North Carolina, as presented at the 1958 Annual Meeting and published in the Proceedings, readily indicate that the North Carolina Dental Society must direct major attention to this vital problem. There can be no question but that the dental manpower needs or requirements for dentists and auxiliary personnel, which is vital to the health and welfare of the citizens of our state, is the immediate concern and inherent responsibility of every dental practitioner in North Carolina.

Dr. John C. Brauer, of the University of North Carolina School of Dentistry, presented his conclusions and certain basic recommendations to the North Carolina Dental Society in May 1958. The House of Delegates endorsed Dean Brauer's program for expansion of dental school facilities at the University of North Carolina. Specifically he recommended:

(a) "That twenty-five (25) additional dental students be admitted to the Freshman Class each year at the earliest possible time consistent with the commitments of the University and other state agencies.

(b) That the dental hygiene program be expanded to permit the admission of sixty (60) students per class when additional facilities can be provided.

(c) That training facilities for dental laboratory technicians be developed, if possible, at the University of North Carolina, or at an appropriate vocational school, consistent with standards set forth by the Council on Dental Education, and consistent with the demand for such personnel in this state."

The implementation of these long range plans at the University of North Carolina will no doubt be delayed due to priority for building and capital expenditures in other areas of the Division of Health Affairs and the University. However, such delay on the part of the University does not preclude the further study and implementation by the Society of a further recommendation by Dr. Brauer.

"That a standing committee of the North Carolina Dental Society be assigned the responsibility for finding ways and means of training dental assistants in appropriate schools throughout the state, wherein the minimum standards for such training will meet the requirements to be set forth by the Council on Dental Education."

RECOMMENDATION: That a standing committee, composed of two members from each district be authorized by the House of Delegates of the North Carolina Dental Society. It is recognized that the American Dental Association has to date not set forth minimum (knowledge and skills) requirements for the training of dental assistants, and that the designated Committee of the North Carolina Dental Society must await the decision of the A.D.A. and its Council on Dental Education. However, let us be ready and alert to needs of our profession and state in this respect.

THIRD PARTY INTERVENTION

Third party encroachment on the private practice of dentistry and medicine is well organized and already far advanced in its accomplishment. This encroachment, if continued, will ultimately destroy the practice of dentistry and medicine as we know it. We are part of a rapidly developing welfare state, possibly already beyond the point of no return. To save this welfare state from becoming a police state is the responsibility of every thinking citizen. To preserve the private practice of dentistry and medicine is the deep concern and sobering responsibility of every dentist and physician in this country.

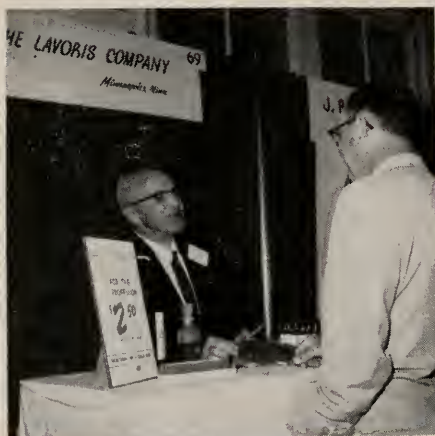
The term "welfare state" has pleasant connotations. It implies a deep concern for the welfare of human beings. It conveys the impression of a boundless compassion and a benevolence without limitation. The doctrine of the welfare state has now been offered to the United States as a new invention. It has been accepted by many on the assumption that it is a device with the inherent capacity to solve the multitudinous complicated problems of mankind—the accumulation of the misdeeds of countless generations of men. In numerous countries we see the result of the logical, inevitable, and ultimate extension of welfare state concepts, notably in the blind confusion that is Europe, the tragic austerity that is England, and the godless despair of the people that is Russia. Will the welfare state bring a higher standard of dental and medical service to the American people? I think not if it is to follow the patterns of other countries. Let us ponder these questions soberly and realistically.

Many other problems and activities of this wonderful organization might be discussed here with profit and satisfaction, but I have already exceeded my time limit. I realize that I have left out many worthy services—that I have only scratched the surface—but time will not permit.

I would be remiss if I did not call your attention to the fine programs arranged by the Dental Assistants and the Dental Hygienists which are running concurrently with our meeting at Pinehurst. These young women deserve a lot of credit for their devoted interest in the dental profession.

I hope it will be possible for you to visit with them. I am confident you will be amply rewarded and I know they will appreciate it.

In closing, may I express the deepest appreciation of which I am capable for the co-operation you have given me as your President. I want to thank Dr. Tom Nisbet and his Program Committee for the very fine program which has been prepared for your pleasure and profit; the Central Office and its staff; the Editor-Publisher, Dr. C. C. Diercks; Dr. Sam Isenhower, Chairman of the Convention Committee; and members of the Clinic, Exhibit, Publicity, Housing, Monitor, Entertainment Committees and all other committees that have been charged with the actual building of this convention program. And may I close this meeting with words which, in many languages, in many forms, in many religions, have brought comfort and strength. "May the peace of God, which passeth all understanding, be with us and remain with us always."



The candid cameraman caught these informal shots in the Commercial Exhibits area.

Report of the Secretary- Treasurer

LUTHER H. BUTLER, D.D.S.
Greensboro, N. C.



DR. BUTLER

NORTH CAROLINA DENTAL SOCIETY REPORT OF AUDIT, FISCAL YEAR ENDED, MAY 31, 1959

Greensboro, North Carolina
June 11, 1959

The Officers and Directors
North Carolina Dental Society
Raleigh, North Carolina

Gentleman:

I have examined the books and records of the North Carolina Dental Society for the fiscal year ended May 31, 1959. My report consisting of balance sheets and statements of receipts and disbursements for the General Fund, the Relief Fund, and the Development Fund, together with supporting schedules, is submitted herewith.

Cash in banks and savings accounts in savings and loan association have been confirmed by the depository institutions. U. S. Treasury Bonds are in a safe deposit box in the First-Citizens Bank and Trust Company, Raleigh, North Carolina, and have been confirmed by examination. Recorded receipts have been traced into the bank. Cancelled checks and paid invoices have been examined and found in order and reasonably classified.

The office furniture and equipment of the Society have been inventoried and valued at the cost thereof. In accordance with accepted practices of fund accounting, these assets and the Society's equity therein are reflected in a separate Capital Fund (see Exhibit G).

Inasmuch as the records are maintained on the cash basis, members' arrears and liabilities, if any, are not reflected in the balance sheet.

Respectfully submitted,

LOUIS N. HAND, JR.
Certified Public Accountant

NORTH CAROLINA DENTAL SOCIETY

Raleigh, North Carolina

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Balance Sheet—General Fund

Exhibit A

May 31, 1959

ASSETS

Cash in Bank—Exhibit B (Note).....	\$13,463.05
Savings Account—First Federal Savings and Loan Association, Durham, North Carolina.....	1,035.31
U. S. Treasury Bonds—at cost—Schedule 1.....	6,102.00
	<u>\$20,600.36</u>

LIABILITIES

Fund Balance: (Note 2)	
Balance—June 1, 1958.....	\$19,877.90
Add:	
Receipts Over Disbursements.....	687.15
Reinvested Savings and Loan Dividend.....	35.31
	<u>\$20,600.36</u>

NOTE 1:

An appropriation to the Development Fund of \$1,131.25 (5 per cent of net dues for 1958-59) is anticipated as of June, 1959.

NOTE 2:

Includes \$1,100.00 unexpended appropriations for the Library and History Committee.

Exhibit B

Statement of Receipts and Disbursements—General Fund

For the Year Ended May 31, 1959

Bank Balance, June 1, 1958.....	\$12,775.90
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RECEIPTS:

Dues	\$48,397.50
Annual Session	5,451.25
Journal	3,157.15

REPORT OF THE SECRETARY-TREASURER

227

Sales of Society History.....	\$ 6.00	
Expense Reimbursements	25.05	
Savings and Loan Dividend.....	35.31	
Sales—Dental Formulary	277.65	
A.D.A. Hospital Dental Service.....	50.00	\$57,399.91
Total Available Funds.....		<u>\$70,175.81</u>

DISBURSEMENTS:

Dues Remitted:

American Dental Association.....	\$19,952.00	
A.D.A. Relief Fund.....	1,069.00	
First District	1,174.00	
Second District	1,145.00	
Third District	1,140.00	
Fourth District	675.00	
Fifth District	530.00	
Refunds	16.50	
Returned Check	56.00	
North Carolina Dental Society.....	15.00	

Total Dues Remitted.....\$25,772.50

Administrative Expenses:

Salary—Executive Secretary	\$7,500.00	
Assistant	3,390.00	
Other	458.25	
Social Security	237.28	
Office Rent	1,200.00	
Utilities	402.98	
Office Supplies	769.40	
Travel—Executive Secretary	757.21	
Telephone	382.28	
Postage	505.69	
Insurance	307.08	
Clipping Service	130.00	16,040.17

Publications:

Journal	\$3,301.64	
Proceedings	1,935.73	
Newsletter	205.09	5,442.46

Annual Session (Schedule 2)..... 6,364.61

Other:

Dental Foundation	\$ 100.00	
Bank Charges	3.30	
Audit	150.00	
District Officers Conference.....	245.91	
Memberships	33.00	
Re-invested Dividend	35.31	
Transfers to Development fund		
Prosthetic Dental Service		
Committee	314.07	
Individual Contributions	25.00	
Development Fund Appropriation..	1,081.25	
Miscellaneous	117.50	
Office Furniture and Equipment....	987.68	3,093.02

Total Disbursements 56,712.76

Bank Balance, May 31, 1959 (To Exhibit A).....\$13,463.05

Schedule 1

U. S. Treasury Bonds—General Fund

May 31, 1959

Serial Number	Date Acquired	Cost	Maturity Value	Maturity Date
M1476155F	Nov. 47	\$ 740.00	\$1,000.00	Nov. 59
M1476157F	Nov. 47	740.00	1,000.00	Nov. 59
M1476158F	Nov. 47	740.00	1,000.00	Nov. 59
M1476159F	Nov. 47	740.00	1,000.00	Nov. 59
M1476160F	Nov. 47	740.00	1,000.00	Nov. 59
M1476161F	Nov. 47	740.00	1,000.00	Nov. 59
C40545J	Jan. 54	74.00	100.00	Jan. 66
C40546J	Jan. 54	74.00	100.00	Jan. 66
C40547J	Jan. 54	74.00	100.00	Jan. 66
Q22367J	Jan. 56	18.00	25.00	Jan. 68
C168915J	Jan. 56	72.00	100.00	Jan. 68
C168916J	Jan. 56	72.00	100.00	Jan. 68
C168917J	Jan. 56	72.00	100.00	Jan. 68
Q60612J	Nov. 56	18.00	25.00	Nov. 68
Q60613J	Nov. 56	18.00	25.00	Nov. 68
Q60614J	Nov. 56	18.00	25.00	Nov. 68
C169985J	Nov. 56	72.00	100.00	Nov. 68
D22068J	Nov. 56	360.00	500.00	Nov. 68
M178508J	Nov. 56	720.00	1,000.00	Nov. 68
Total (To Exhibit A)		\$6,102.00	\$8,300.00	

1959 Annual Session Expenses

Schedule 2

CONVENTION COMMITTEE

Stenotypist	\$ 517.30	
January Meeting	56.65	
Signs	25.70	
Registration (Registrars, badges, ribbons).....	321.64	
Mimeograph Supplies	54.88	
House of Delegates.....	45.71	
Transportation—tips, meals, insurance.....	128.45	
Special speaker—honorarium and expenses.....	174.72	
Presentations	94.12	
Staff—Hotel Expense	326.55	
Flowers	22.66	\$ 1,768.38

EXHIBITS COMMITTEE

Refund	\$ 21.25	
Prizes	218.95	
Exhibitors' Social Hour.....	70.17	
Exhibit Space and Decorating.....	1,076.77	1,387.14

ENTERTAINMENT COMMITTEE

Banquet	\$ 11.75	
Dance	350.00	
Reception	352.00	
Variety Show	83.40	
Flowers	65.00	862.15

HOUSING COMMITTEE	57.27
NECROLOGY COMMITTEE	10.40

PROGRAM COMMITTEE

Clinicians—Honorarium and Travel.....	\$ 1,312.22
Telephone	52.95

Schedule 2 (Continued)

Visual Education and Scientific Exhibits.....	\$ 46.50	
Sound System	167.00	
Printing	131.33	\$ 1,710.00
ENTERTAINMENT OUT OF STATE VISITORS		
COMMITTEE		151.03
PUBLICITY COMMITTEE		
Photo Supplies	\$ 74.99	
A. C. Snow—Honorarium and Expenses.....	149.06	224.05
SUPERINTENDENT OF CLINICS		
		32.00
GOLF COMMITTEE		
Guest Speaker	\$ 46.03	
Pries	84.23	130.26
SKEET SHOOT COMMITTEE		
		31.93
Total Annual Session Expenses (To Exhibit B).....	\$ 6,364.61	

Balance Sheet—Relief Fund

Exhibit C

May 31, 1959

ASSETS

Cash in Bank—(Exhibit D).....	\$ 3,672.72
Investment—First Federal Savings and Loan Association, Durham, North Carolina.....	2,488.66
U. S. Treasury Bonds—Series F—Maturity Value \$13,825.00— at cost—(Schedule 3).....	10,145.00
	<u>\$16,306.38</u>

LIABILITIES

Fund Balance	
June 1, 1958.....	\$14,331.15
Receipts over Disbursements for the Year.....	1,662.94
Savings and Loan Investments.....	1,052.29
	<u>17,046.38</u>
Less: Cost of Matured Treasury Bond.....	740.00
May 31, 1959.....	<u>\$16,306.38</u>

Relief Fund

Exhibit D

STATEMENT OF RECEIPTS AND DISBURSEMENTS

For the Fiscal Year Ended May 31, 1959

June 1, 1958—Balance—Security National Bank.....	\$ 2,009.78
RECEIPTS	
Scrap Amalgam	\$ 2,542.94
A.D.A. Share Christmas Seals Receipts.....	942.50
Reinstatement Penalties	15.00
Matured Treasury Bond.....	1,000.00
Savings and Loan Dividend.....	52.29
	<u>4,552.73</u>
	\$ 6,562.51
DISBURSEMENTS	
Deposits: First Federal Savings and Loan Association, Durham, N. C.....	\$ 1,052.29
A.D.A. Special Relief Fund.....	1,837.50
	<u>2,889.79</u>
May 31, 1959—Balance—Security National Bank (Exhibit C) ..	<u>\$ 3,672.72</u>

Schedule 3

U. S. Treasury Bonds—Relief Fund

May 31, 1959

Serial Number	Date Acquired	Cost	Maturity Value	Maturity Date
M1476164F	Nov. 47	\$ 740.00	\$ 1,000.00	Nov. 59
M1686901F	Aug. 50	740.00	1,000.00	Aug. 62
M1686902F	Aug. 50	740.00	1,000.00	Aug. 62
M1686903F	Aug. 60	740.00	1,000.00	Aug. 62
V11338J	Jan. 54	3,700.00	5,000.00	Jan. 66
D18386J	Jan. 54	370.00	500.00	Jan. 66
Q17164J	Jan. 54	18.50	25.00	Jan. 66
Q17165J	Jan. 54	18.50	25.00	Jan. 66
M173548J	May 55	720.00	1,000.00	May 67
C153116J	May 55	72.00	100.00	May 67
C153117J	May 55	72.00	100.00	May 67
C153118J	May 55	72.00	100.00	May 67
C153119J	May 55	72.00	100.00	May 67
M198562J	Dec. 55	720.00	1,000.00	Dec. 67
C206330J	Dec. 55	72.00	100.00	Dec. 67
C206331J	Dec. 55	72.00	100.00	Dec. 67
C206332J	Dec. 55	72.00	100.00	Dec. 67
Q73231J	Dec. 55	18.00	25.00	Dec. 67
Q73232J	Dec. 55	18.00	25.00	Dec. 67
Q73233J	Dec. 55	18.00	25.00	Dec. 67
D22067J	Nov. 56	360.00	500.00	Nov. 68
M178507J	Nov. 56	720.00	1,000.00	Nov. 68
(Exhibit C)		<u>\$10,145.00</u>	<u>\$13,825.00</u>	

Exhibit E

Balance Sheet—Development Fund

May 31, 1959

ASSETS

Savings Account—First Federal Savings and Loan Association...\$ 3,386.65

LIABILITIES

Fund Balance—For Permanent Improvements.....\$ 3,386.65

Exhibit F

Receipts and Disbursements—Development Fund

For the Year Ended May 31, 1959

June 1, 1958—BALANCE, First Federal Savings and Loan Association, Durham, N. C.....\$ 1,802.09

RECEIPTS

Transferred from General Fund
 (Prosthetic Dental Service Committee).....\$ 314.07
 Dividend received—Savings and Loan Account.. 79.24
 Appropriation from General Fund—5 per cent
 of net dues for 1957-58..... 1,081.25
 Contributions—Individuals 110.00

Total Receipts\$ 1,584.56 1,584.56

\$ 3,386.65

DISBURSEMENTS NONE

May 31, 1959—BALANCE—First Federal Savings and Loan Association, Durham, N. C.....\$ 3,386.65

Exhibit G

Capital Fund
Balance Sheet
May 31, 1959

ASSETS

Furniture and Equipment—at cost.....\$ 6,703.47

SURPLUS

Surplus Not Available—Invested in Fixed Assets.....\$ 6,703.47

Reconciliation of Bank Accounts

Schedule 4

May 31, 1959

GENERAL FUND: First-Citizens Bank & Trust Co., Raleigh, N. C.

Balance per bank statement.....\$15,363.96

Less: Outstanding checks

Number	Payee	Amount
1304	Dental Foundation of N. C.....	\$ 10.00
1309	Andrew M. Cunningham.....	510.57
1310	Mira Riddle	234.34
1311	Harry James	12.00
1312	Dr. A. C. Current, Jr.....	31.93
1313	Dr. Boyce A. Brawley.....	10.40
1314	Dr. W. K. Griffin.....	84.23
1315	First-Citizens Bank & Trust Company	188.46
1316	Smith Studios	9.85
1317	First Federal Savings and Loan.....	314.07
1318	O'Neal Motors	18.45
1319	A. M. Cunningham.....	3.60
1320	A. M. Cunningham.....	4.05
1321	Dr. B. B. Sapp, Jr.....	4.00
1322	American Dental Association.....	16.00
1323	American Dental Association.....	83.50
1324	A.D.A. Relief Fund.....	6.00
1325	Dr. A. T. Lockwood.....	22.00
1326	Dr. W. P. Hinson, Jr.....	10.00
1327	Dr. C. P. Osborne, Jr.....	5.00
1328	Dr. R. B. Barden.....	9.00
1329	Dr. R. Bruce Warlick.....	159.00
1330	Underwood Corporation	154.46
		1,900.91
	Cash in Bank, May 31, 1959.....	\$13,463.05
RELIEF FUND: Security National Bank		
	Balance per bank statement.....	\$ 3,830.22
	Less: Outstanding check	
	No. 41 American Dental Association Relief Fund.....	157.50
	Cash in bank—May 31, 1959.....	\$ 3,672.72

Report of the Editor- Publisher

C. C. DIERCKS, D.D.S.
Morganton, N. C.



DR. DIERCKS

Because of the outstanding contributions of the immediate past Editor, Dr. Frank G. Atwater and all former Editors, your JOURNAL was off to a running start when your new Editor took over. Your managing Editor, Mr. Andrew M. Cunningham, has contributed his time and talents tirelessly, and without his efforts your JOURNAL would have suffered.

The North Carolina Dental Society answered the request of your Editor this year by supplementing the JOURNAL treasury with an amount that enabled us to get underway with some art work. The proper amount of art work is essential in any successful publication.

Your JOURNAL is attempting to print more and more pictures as time goes on. The mid-winter issue was an example. Since there is considerable expense involved with each cut, we are able to bring you more and more pictures with your financial support.

The front cover must be changed this year, for the plate is about worn out. This, too, is going to involve a considerable expenditure.

With continued support from each member of our Society, it is the desire of the JOURNAL staff to continue to improve the quality of your JOURNAL in the future as has been done in the past.

RECOMMENDATIONS:

This report is informational in nature, and no recommendations are submitted.

C. C. DIERCKS, *Editor-Publisher*

Action by the House of Delegates: Accepted by title, May 3, 1959.

Report of the Executive Secretary

ANDREW M. CUNNINGHAM
Raleigh, N. C.



MR. CUNNINGHAM

C. Northcote Parkinson, in his satire on organizations and men, *Parkinson's Law*, said that the modern organization multiplies its administrative branch whether or not it increases its output. Certainly your Central Office has not been a victim of this common illness of modern bureaucracy—swollen administration.

Now in its fourth year of operation, the staff numbers two, just as it did when the office was established in September 1955. Each succeeding year, effort has been made to expand the services of the Central Office and make it a more valuable arm of the Society. I hope the members are aware that the output has increased.

Let me say at the outset, that these past four years have been years of pleasant association. The co-operation I have received from officers, committees and the members themselves has been wonderful and I am grateful. Whatever success the Central Office has had, whatever it has accomplished, is a tribute to all of you.

The duties of the Executive Secretary as outlined in the By-Laws are manifold. I have tried my best to discharge my responsibilities in all areas, but I will confine this report to but a few of the high spots.

"HAVE JOB TO DO—WILL TRAVEL"

While my assistant, Miss Riddle, kept the home-fires burning, my itinerary in the interest of the Society during the past year has been moderately extensive.

Last June I represented the Society at the 10th Annual State Officers' Management Conference at the ADA offices in Chicago and was invited to participate as a panelist in a discussion of Current Problems of Constituent Societies. This was a stimulating experience.

During September and October I attended all five of the District meetings, and was impressed with the excellence of the programs. The meetings were well organized and gave evidence of a prodigious amount of prior planning and preparation. I am indebted to all the Districts for their gracious hospitality to Mrs. Cunningham and me at these meetings.

November found me in Dallas at the 99th Annual Session of the

American Dental Association, where I also attended the meetings of the American Association of Dental Editors and the State Secretaries' Conference. It was my privilege to be present at the Fifth District Caucus meetings and to sit with the North Carolina delegation at all the sessions of the House of Delegates.

During the year I traveled throughout the state for conferences with State and District Officers and Committee Chairmen, and to meet with local societies.

COMMITTEE WORK

The Committees have been unusually active this year, judging by the correspondence which crossed my desk and by the fine reports submitted to the House of Delegates. The Committee Chairmen are due a lot of credit. In a great many instances they are the unsung heroes of an administration. They do a tremendous job for the Society and without their effective leadership and initiative in the areas for which they are responsible, nothing could be accomplished.

It is the duty of the Executive Secretary to co-ordinate the work of these Committees. This I have done to the best of my ability and it has been a most interesting task this year.

PUBLICATIONS

As Managing Editor of the JOURNAL, I worked in close association with the Editor-Publisher and have been responsible for the business affairs of the JOURNAL as well as the technical aspects of make-up, printing, and publishing.

The JOURNAL this year has endeavored to carry more news of local society activities and has made a good deal of progress in this direction, thanks to the co-operation of the District Editors and the local society officers. I have one suggestion. If the local societies would place the Central Office on their mailing lists, it would help the cause tremendously.

The Central Office continues to prepare at least eight (8) issues of the Newsletter each year and the response to this informal way of keeping the members informed of the Society's activities has been rewarding. The many comments, criticisms and compliments have indicated that the effort has been well worthwhile.

PUBLIC RELATIONS AND THE PRESS

Good publicity is the result of good public relations. Too often the cart is placed before the horse, and publicity is sought and expected without effective public relations. When an organization accomplishes something in the interest of the public, then you can rest assured press coverage will be the result.

From the clippings received in this office it is apparent that the component and local societies are improving their liaison and relations with the press in their respective areas. The Central Office has received an average of better than twenty (20) clippings per week from North Carolina newspapers from Manteo to Murphy. There seems to be a much greater awareness on the part of members and groups throughout the state as to what is solid news and the determination and know-how to see that it is published. More important, organized dentistry has been doing things in the interest of the public and this is reflected in the increased press coverage. This is encouraging.

SUMMARY

It was a distinct pleasure to serve under Dr. Moser, his administrative officers and the Executive Committee. I am also grateful to the District Officers, especially the District Secretaries, for their unqualified co-operation with the Central Office.

My thanks once again to my secretary, Miss Riddle. She is a real asset not only to me, but to the Society. Together we have endeavored to keep your house in order.

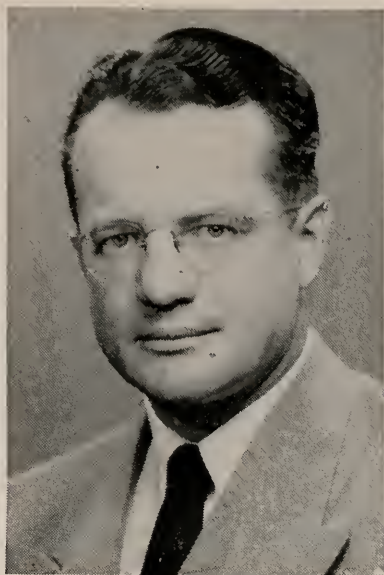
April 10, 1959
Raleigh, North Carolina

ANDREW M. CUNNINGHAM
Executive Secretary

Action by the House of Delegates: Accepted by title, May 3, 1959.

Minutes of Executive Committee

NORMAN F. ROSS, D.D.S.
Chairman



DR. ROSS

May 7, 1958
July 27, 1958
September 27, 1958

December 6, 1958
January 10, 1959
January 11, 1959

May 2, 1959

THE CAROLINA, PINEHURST, NORTH CAROLINA
May 7, 1958

The Executive Committee of the North Carolina Dental Society convened at the call of the President in the Dutch Room at The Carolina, Pinehurst, North Carolina, Wednesday, May 7, 1958 at 2:15 p.m., immediately following the close of the 102nd Annual Session of the North Carolina Dental Society.

Members of the Executive Committee present were: Doctors S. Everett Moser, W. B. Sherrod, Charles H. Teague, Luther H. Butler, R. B. Barden, Moultrie H. Truluck and Norman F. Ross.

Others present were: Dr. C. C. Diercks, Associate Editor-Publisher, Mr. Andrew M. Cunningham, Executive Secretary and Miss Mira Riddle, assistant to the Executive Secretary.

The meeting was called to order by Dr. Moser and Mr. Cunningham led in prayer.

Dr. Moser announced the appointment of Dr. Norman F. Ross as Chairman of the Executive Committee for the coming year. Dr. Moser presented the gavel to Dr. Ross, and he presided for the rest of the meeting.

The minutes of the meeting of January 11, 1958, were read and approved as corrected, on motion by Dr. Truluck, seconded by Dr. Barden and duly carried.

The minutes of the meeting of January 12, 1958, were read and approved as corrected, on motion by Dr. Truluck, seconded by Dr. Teague and duly carried.

The Secretary-Treasurer's Report of April 30, 1958, as submitted to the House of Delegates 1958 Session was received for information and studied.

Non-members of the Executive Committee were excused at this point and the Executive Committee met in executive session to appoint the Editor-Publisher and the Executive Secretary for the year 1958-59. At the conclusion of the Executive Session, Dr. Ross announced that:

(1) Dr. C. C. Diercks had been appointed Editor-Publisher for the year 1958-59 on motion by Dr. Moser, seconded by Dr. Truluck and duly carried.

(2) Mr. Andrew M. Cunningham had been unanimously appointed Executive Secretary for the year 1958-59 on motion by Dr. Truluck, seconded by Dr. Moser, at an annual salary of \$7,500.00. Included in the motion was an authorization to increase the annual salary of Miss Mira Riddle, assistant to the Executive Secretary, by \$210.00.

On January 11, 1958, the Executive Committee had received requests from Doctors Cecil B. Hall, John T. Hughes and E. A. Pearson, Jr., that their state dues be waived for the current year since all three were engaged in full-time graduate study. This matter was referred to the Constitution and By-Laws Committee (minutes of January 12, 1958) for a ruling as to the authority of the Executive Committee to waive dues in such cases. The Constitution and By-Laws Committee in its report to the House of Delegates 102nd Annual Session did not approve "of exempting a member from paying dues because he is taking post-graduate work." As to sickness and hardship cases, the committee stated "we believe the Society has provided for these members in times past and can continue to do so in a careful and sensible manner. To authorize the Executive Committee or any other committee to grant waivers of dues may start a chain reaction of requests that would produce one headache after the other."

Mr. Cunningham reported that all three had paid their 1958 state dues; that the Fourth District had waived 1958 district dues for Dr. Pearson; and that the Third District had agreed to waive 1958 district dues for Doctors Hall and Hughes, provided they receive no remuneration from outside practice while engaged in post-graduate study.

In view of the ruling of the Constitution and By-Laws Committee Dr. Barden moved and Dr. Truluck seconded that the 1958 state dues for the men in question not be remitted. The motion was duly carried, and the Executive Secretary was instructed to transmit this information to those concerned.

A request was received from Dr. J. B. Howell of Greensboro that he be reinstated to membership in 1958 without penalty and that he be allowed to pay back dues for 1954-55-56-57 during which time he was on active duty with the armed forces. It was noted that the ADA would accept back dues for three years, but that permission to pay back dues for more than three years could not be granted without the consent of the Board of Trustees.

On motion by Dr. Truluck, seconded by Dr. Moser, it was voted that Dr. Howell be allowed to pay his back ADA dues for the years in question in conformity with the ADA policy and that he be given credit for membership as a military member in the North Carolina Dental Society for those same years for which he pays his back ADA dues.

Mr. Cunningham informed the Executive Committee that Dr. Oscar Hooks of Wilson had applied for ADA Life Membership, and that Dr. Hooks had been a member in good standing for 49 years. However, Dr. Hooks had not paid his 1958 dues and his application could not be approved until he had done so. Mr. Cunningham stated that Dr. Hooks had been so advised. The matter was received for information.

A request from Dr. L. F. Bumgardner that the 1958 dues of Dr. V. A. Black be refunded to his widow, Dr. Black having died January 24, 1958, was tabled. Mr. Cunningham was instructed to write the ADA to determine the policy of the ADA in such cases.

On motion by Dr. Truluck seconded by Dr. Butler and duly carried, Dr. E. L. Edwards of Morganton and a member of the First District, was classified as a Retired Member. The Executive Committee of the

First District had previously approved his application that he be placed in this category.

An insurance proposal by the Jefferson Standard Life Insurance Company pertaining to the Executive Secretary dated April 8, 1958, was tabled on motion by Dr. Truluck, seconded by Dr. Barden and duly carried.

On motion by Dr. Butler, seconded by Dr. Moser and duly carried the Executive Secretary was authorized to attend the 10th State Secretaries' Management Conference in Chicago June 9-11. His expenses are to be borne by the Society.

Dr. Butler reported that he had received a letter dated April 23, 1958 from the Internal Revenue Service in Greensboro to the effect that contributions to the Development Fund are deductible by donors in computing their taxable net income provided the fund is established exclusively for "religious, charitable, scientific, literary or educational purposes, apart from other funds", and separate books and accounts are maintained. This report was received for information.

The request of the Program Committee for an appropriation of \$2,000.00 for the 1959 Annual Session was tabled on motion by Dr. Butler, seconded by Dr. Truluck and duly carried.

The Chairman of the Executive Committee instructed the Secretary-Treasurer to employ a qualified auditor to audit the Society's financial accounts for the fiscal year 1957-58.

A request from the Dental Formulary Committee regarding the future activities of the committee and the disposition of proceeds received from the sale of the *North Carolina Dental Formulary* was tabled on motion by Dr. Truluck, seconded by Dr. Barden and duly carried.

On motion by Dr. Butler, seconded by Dr. Barden and duly carried the Chairman of the Executive Committee and the Executive Secretary were authorized to select and have printed suitable stationery for the use of officers and committee chairmen during the coming year.

The Executive Secretary informed the committee that in view of the change in postal fees effective July 1, 1958, that the present postage meter in the Central Office would not adequately serve its purpose and it would probably be necessary to purchase a new one. The matter was tabled on motion by Dr. Truluck, seconded by Dr. Sherrod and duly carried.

The Executive Secretary was instructed to secure a tentative date for the 1960 Annual Session at The Carolina in Pinehurst subject to the approval of the Executive Committee.

There being no further business the meeting was adjourned at 4:30 p.m., on motion by Dr. Truluck, seconded by Dr. Butler and duly carried.

LUTHER H. BUTLER

Secretary-Treasurer

Read and approved July 27, 1958.

CENTRAL OFFICE, RALEIGH, N. C.

July 27, 1958

The Executive Committee of the North Carolina Dental Society convened at the call of the President at the Central Office, Raleigh, North Carolina, July 27, 1958. The meeting was called to order by Dr. Ross, Chairman, at 9:35 a.m. and Dr. E. A. Pearson, Jr., led in prayer.

Members of the Executive Committee present were: Doctors Norman F. Ross, Chairman; W. B. Sherrod, R. B. Barden, S E Moser, L. H. Butler, and C. H. Teague.

Others present were: Dr. C. C. Diercks, Editor-Publisher, Dr. E. A. Pearson, Jr., Mr. Andrew M. Cunningham, Executive Secretary and his assistant Miss Mira Riddle.

The minutes of May 7, 1958 were read and approved on motion by Dr. Sherrod, seconded by Dr. Barden and duly carried.

The auditor's report of the Secretary-Treasurer's accounts for the fiscal year ended May 31, 1958, was received for information.

The financial report of the Secretary-Treasurer as of June 30, 1958, was approved on motion by Dr. Moser, seconded by Dr. Sherrod and duly carried. It showed the following balances on hand:

General Fund—checking account, \$11,126.17; First Federal Savings and Loan Association, Durham, \$1,017.50; U. S. Treasury Bonds, (cost) \$6,102.00.

Relief Fund—checking account, \$1,747.28; First Federal Savings and Loan Association, Durham, \$1,457.32; U. S. Treasury Bonds (cost) \$10,885.00.

Development Fund — First Federal Savings and Loan Association, Durham, \$1,833.48.

On motion by Dr. Moser, seconded by Dr. Butler and duly carried, it was voted that the proceeds of U. S. Treasury Bond No. M1338950F (Relief Fund Account) which matures October 1958 at \$1,000.00 be deposited in the First Federal Savings and Loan Association, Durham, to the credit of the Relief Fund.

A proposal of Key Man Insurance on the Executive Secretary was received for information on motion by Dr. Butler, seconded by Dr. Teague and duly carried.

Dr. E. A. Pearson, Jr., was recognized. He reported there was no change in the condition of Dr. E. A. Branch, Director of the Division of Oral Hygiene who has been critically ill since he suffered a cerebral hemorrhage July 1, 1958. On motion by Dr. Butler, seconded by Dr. Moser and duly carried, the Secretary-Treasurer was instructed to send a message to Dr. Branch expressing the concern of the Executive Committee members and their wish that he would have a speedy recovery.

A request from the Program Committee for an appropriation of \$2,000.00 was presented. This matter had been tabled May 7, 1958. Discussion followed as to what the responsibilities of the Program Committee are and what items of expense are to be charged against the Committee's appropriations.

On motion by Dr. Barden, seconded by Dr. Moser and duly carried, the Chairman was instructed to appoint a committee to work with the Executive Secretary to determine the specific items of expense for which the Program Committee would be responsible. Dr. Ross appointed Dr. Butler, Chairman of this Committee. He asked that this Committee prepare an outline of the duties and responsibilities of all Officers, and Committees and that this information be kept current from year to year in the form of a manual. This would serve as a guide for each Officer and Committee Chairman as he assumed office and enable him to do a more effective job.

On motion by Dr. Barden, seconded by Dr. Teague and duly carried, an appropriation of \$2,000.00 was granted the Program Committee with the stipulation that the Chairman of this Committee be instructed to keep expenses as low as possible; and that he be further informed that the appropriation was to cover the honoraria, travel and lodging for clinicians *only*, postage, telephone, loud speaker system, rentals of projectors and films and the printing and mailing of the program.

It was moved by Dr. Butler, seconded by Dr. Sherrod and duly carried, that the North Carolina Dental Assistants' Association, the North Carolina Dental Hygienists' Association and the North Carolina Dental Auxiliary be advised, through proper channels, that it is the policy of the Society not to solicit funds or prizes from any source and to suggest to these organizations that they adopt a similar policy.

In response to a request from the Dental Formulary Committee, it was moved by Dr. Barden, seconded by Dr. Moser and duly carried that:

(1) The Dental Formulary Committee continue its work with a similar committee from the North Carolina Pharmaceutical Association for periodic revisions of the *North Carolina Dental Formulary*.

(2) The matter of making the Dental Formulary Committee a Standing Committee be deferred and reconsidered at a later date.

(3) The Secretary-Treasurer confer with the auditor in regard to the accounting for and allocating of proceeds from the sale of the *North*

Carolina Dental Formulary and report to the Executive Committee at its next meeting.

It was moved by Dr. Moser, seconded by Dr. Butler and duly carried, that \$1,081.25, which represents 5 per cent of income from state dues during the fiscal year 1957-58, be transferred from the General Fund to the Development Fund, and deposited in the First Federal Savings and Loan Association, Durham.

The Executive Secretary reported that closer liaison between his office, the agents for group insurance policies and the District Secretaries had become necessary. It has been the policy to allow group insurance policies to be issued to dentists whose applications for membership are on file with the District Secretaries. In the future, a statement from the District Secretary will be necessary before this privilege is granted, and no insurance policy will be issued without endorsement by the Central Office.

Editor-Publisher C. C. Diercks outlined plans for proposed changes in the format of the JOURNAL to make it more readable. He said that more news items of local society activities would be carried in the JOURNAL, provided the local societies would co-operate in sending pictures and items of interest for publication. Most of the improvements contemplated would be taken care of by income from advertising and that the JOURNAL would continue to pay for itself, he reported.

The Editor-Publisher asked that the Program Committee encourage clinicians to submit manuscripts of essays presented at the Annual Session. He pointed out that the Constitution and By-Laws provides that "all papers presented to and before the Society shall become the property of this body."

The Executive Secretary noted that the amendments to the Constitution and By-Laws made at the 1957 session of the House of Delegates had not been printed. It was agreed that these amendments would not be printed until after the 1959 session of the House of Delegates since it was anticipated that further amendments might be considered at this meeting.

The Executive Secretary reported that items of equipment needed for the Central Office included an electric typewriter and an additional safe and cabinet for the visible index file. On motion by Dr. Moser, seconded by Dr. Butler, and duly carried, an appropriation of \$1,000.00 was authorized to be used for the purchase of equipment and furniture for the Central Office.

A communication from The Carolina, Pinehurst, North Carolina, confirmed the dates of May 3-6, 1959 for the 103rd Annual Session, and advised that the exact dates for the 1960 meeting would have to be confirmed later because of a conflict with a golf tournament.

Dr. Moser moved that the Society print a condensed program for the 1959 Annual Session and that the North Carolina Dental Auxiliary, the North Carolina Dental Assistants' Association, and the North Carolina Dental Hygienists' Association be notified that programs for their annual meetings could not be included in the Society's program. However, their programs would be included in the April issue of the JOURNAL. The motion was seconded by Dr. Barden and duly carried.

A communication from Dr. S. A. Barksdale advised that the money appropriated to the Children's Dental Health Week Committee for the fiscal year 1957-58 had not been used and requested that this amount be held over for use the next fiscal year. On motion by Dr. Moser, seconded by Dr. Teague and duly carried, it was voted that as a general policy committee appropriations would not be allowed to accrue from year to year and that Dr. Barksdale be so advised.

A communication from Mr. Charles Waterbury, Chapel Hill, proposed a survey on distribution of dentists' hours. It was received for information.

The recommendation of the Children's Dental Health Week Committee in its report to the 1958 House of Delegates that "an annual lecture be given at the State Dental Convention on *The Importance of Dental Health Education* was referred to the Program Committee for their consideration.

The Executive Secretary was instructed to advise the Legislative

Committee that if an appropriation would be needed to employ professional help in its endeavor to have the insurance laws amended at the next General Assembly as recommended in the report of the Insurance Coverage Adjustment Committee, that the Executive Committee be so informed without delay.

A motion by Dr. Butler that the Executive Committee refrain from appropriating money to be spent for the purchase of alcoholic beverages to be used for the entertainment of out-of-state visitors or its own members, was not considered for lack of a second. Dr. Butler requested that his motion be recorded and stated that it was not made for personal or financial reasons.

On motion by Dr. Barden, seconded by Dr. Moser and duly carried, the next meeting of the Executive Committee was set for 2:00 p.m., Sunday, September 28 at the Hotel Charlotte in Charlotte.

It was recommended that the Necrology Committee be asked to study the matter of memorials to deceased dentists presented at the Annual Session and to recommend a more definitive policy in regard to the procedure for the consideration of the Executive Committee.

There being no further business the meeting was adjourned at 1:30 p.m. on motion by Dr. Teague, seconded by Dr. Butler and duly carried.

LUTHER H. BUTLER, D.D.S.
Secretary-Treasurer

Read and approved September 28, 1958

HOTEL CHARLOTTE, CHARLOTTE, NORTH CAROLINA
September 28, 1958

The Executive Committee of the North Carolina Dental Society convened at the Hotel Charlotte, Charlotte, North Carolina, September 28, 1958. The meeting was called to order by Dr. Norman F. Ross, Chairman at 2:00 p.m. Mr. Andrew M. Cunningham led in prayer.

Members of the Executive Committee present were: Doctors Norman F. Ross, Chairman; S. E. Moser, W. B. Sherrod, Charles H. Teague, Luther H. Butler and M. H. Truluck. (Dr. R. B. Barden telephoned his regrets that hurricane conditions in Wilmington made it impossible for him to attend.)

Others present were: Dr. C. C. Diercks, Editor-Publisher; Andrew M. Cunningham, Executive Secretary; Dr. T. G. Nisbet, Chairman Program Committee; and Dr. E. U. Austin, Chairman Legislative Committee.

Dr. Ross recognized Dr. Nisbet, Chairman of the Program Committee. Dr. Nisbet stated that the Committee did not approve of the recommendation made by the Children's Dental Health Week Committee to the 1958 House of Delegates that "an annual lecture be given at the State Dental Convention on *The Importance of Dental Health Education*." The matter had been referred to the Program Committee by the Executive Committee July 27, 1958.

Reporting on the progress of the Committee on plans for the 103rd Annual Session, Dr. Nisbet said that three main clinicians had been secured—Dr. Stanley Harris of Chicago, Dr. S. Meigs Jones of Kansas City and Dr. Leroy W. Peterson of St. Louis—and that four projected clinics were being scheduled. He explained that the Committee this year offered a blanket stipend to a clinician which included the customary honorarium plus transportation; but did not include his hotel expenses while at Pinehurst. On this basis, the Committee's expenses for clinicians amounted to \$1,175.00.

Dr. Ross then recognized Dr. E. U. Austin Chairman of the Legislative Committee.

Dr. Austin reported that the Legislative Committee had been investigating the cost of employing legal counsel to assist the Committee in its efforts to have the State insurance laws amended so as to make it mandatory that insurance companies pay dentists directly for services rendered under Blue Shield hospital insurance plans. To date the Committee has received estimates ranging from \$3,500.00 plus expenses of \$200.00, to \$5,000.00 plus expenses of \$500.00 to \$2,500.00.

Dr. Austin explained that the Committee would attempt to have the State Insurance Commissioner and/or the Attorney General rule favorably on the matter. If these means failed, then the only alternative was to approach the 1959 State Legislature and seek an amendment in the state insurance laws. The latter would require legal counsel.

On motion by Dr. Truluck, seconded by Dr. Moser and duly carried, the Executive Committee approved the Legislative Committee's actions to date and requested the Committee to continue its efforts to remedy the discriminatory policy now practiced by Blue Shield Companies in respect to the payment to dentists for services rendered. Further, the Executive Committee approved the plan now being followed by the Legislative Committee of alerting the members to the situation and asking that the members contact their representatives, make them aware of the problem and urge their support in the event it is necessary to seek an amendment of the insurance laws.

It was noted that the District Societies were accepting prizes from dental laboratories and dental supply houses to be awarded at their annual meetings. On motion by Dr. Butler, seconded by Dr. Teague and duly carried, the District Officers' Conference is to be informed of the State Society's policy in regard to soliciting of funds or prizes from commercial concerns with the request that the districts consider adopting a similar policy.

On motion by Dr. Truluck, seconded by Dr. Butler and duly carried, all proceeds from the sale of the *North Carolina Dental Formulary* will not be allocated for the Dental Formulary Committee. Should the Committee desire an appropriation for printing revisions in the future a request will have to be submitted to the Executive Committee.

The minutes of July 27, 1958 were read and approved as corrected on motion by Dr. Truluck, seconded by Dr. Moser and duly carried.

The financial report of the Secretary-Treasurer as of September 27, 1958, was received for information. It showed the following balances on hand:

General Fund—First Citizens Bank and Trust Company, Raleigh, \$4,738.04; First Federal Savings and Loan Association, Durham, \$1,017.50; U. S. Treasury Bonds (cost) \$6,102.00.

Relief Fund—Security National Bank, Raleigh, \$2,112.28; First Federal Savings and Loan Association, Durham, \$1,457.32; U. S. Treasury Bonds (cost) \$10,885.00.

Development Fund—First Federal Savings and Loan Association, Durham, \$2,914.73.

Dr. W. B. Sherrod, Chairman of the Budget Committee, presented a proposed budget for 1958-59. On motion by Dr. Truluck, seconded by Dr. Teague and duly carried, a budget for 1958-59 was adopted and a copy is attached to these minutes.

Dr. Butler reported that contributions to the Development Fund could not be considered as deductible from the income taxes of donors, according to the latest information he had received from the Society's auditor and the Internal Revenue Department in Greensboro. The Executive Committee instructed Dr. Butler to continue his efforts to have contributions to the Development Fund declared tax deductible.

A communication from the Medical Society of North Carolina regarding the possibility of the North Carolina Dental Society renting administrative space in the proposed headquarters building to be erected by the Medical Society was received for information pending receipt of more details about the matter.

On motion by Dr. Moser, seconded by Dr. Butler and duly carried, the Executive Secretary was authorized to attend the ADA meeting in Dallas, Texas, November 10-13, 1958.

Dr. Butler reported that the supply of Past President emblems was now exhausted and that it would be necessary to purchase a new supply if the custom of awarding the emblems was to be continued. The Executive Secretary was instructed to determine means used by other Constituent Societies to honor past presidents. Pending receipt of this information no

action is to be taken on purchasing Past President emblems.

Editor-Publisher C. C. Diercks stated that the President's Page would be included in each issue of the JOURNAL; but the Secretary's Page and the President-Elect's Page could be used or not at the discretion of those officers. He urged that officers writing for the JOURNAL be brief and to the point. He cited a need for editorials and invited the members of the Executive Committee to submit editorials.

The Executive Secretary was instructed to arrange for a joint meeting of the Executive Committee and the Convention Committee at The Carolina, Pinehurst, North Carolina, either the week end of January 10-11 or January 17-18.

There being no further business, the meeting was adjourned at 5:00 p.m. on motion by Dr. Butler, seconded by Dr. Teague and duly carried.

LUTHER H. BUTLER
Secretary-Treasurer

Read and approved January 10, 1959

BUDGET 1958-59 NORTH CAROLINA DENTAL SOCIETY

Adopted by the Executive Committee

September 28, 1958

ESTIMATED RECEIPTS

Dues from members.....	\$48,025.00	
Annual Session	6,375.00	
Journal	3,000.00	\$57,400.00

BUDGETED DISBURSEMENTS

Dues		
Dues ADA	\$19,550.00	
ADA Relief Fund.....	1,050.00	
Districts	4,600.00	\$25,200.00

Administrative Expense

Salaries—		
Executive Secretary	\$ 7,500.00	
Assistant	3,390.00	
Other	450.00	
Social Security	260.00	
Rent	1,200.00	
Utilities	375.00	
Office Supplies	675.00	
Travel	1,000.00	
Telephone	375.00	
Newsletter	150.00	
Postage	475.00	
Insurance	310.00	
Clipping Service	125.00	
Miscellaneous	100.00	16,385.00
Capital Outlay		832.75
Journal		3,300.00
Annual Session		6,750.00
Committees		
Dental Health Week.....	\$ 200.00	
Lib. and History.....	500.00	
Rural Health	150.00	850.00
Audit		150.00
District Officers' Conference.....		125.00
Memberships		50.00
Proceedings		1,926.00
Development Fund		1,081.25
		56,650.00

Contingency Fund (Estimated Receipts Less

Budgeted Expenditures)\$ 750.00

SEDGEFIELD INN, GREENSBORO, NORTH CAROLINA

December 6, 1958

The Executive Committee convened at Sedgefield Inn, Greensboro, North Carolina, December 6, 1958. Dr. Norman F. Ross, Chairman, presided and called the meeting to order at 10:15 p.m.

Dr. Ross opened the meeting with prayer.

Members of the Executive Committee present were: Doctors Norman F. Ross, Luther H. Butler, R. B. Barden, C. H. Teague, W. B. Sherrod and S. Everett Moser.

Others present were: Dr. C. C. Diercks, Editor-Publisher, Dr. E. U. Austin, Chairman, Legislative Committee; Mr. A. M. Cunningham, Executive Secretary; and Miss Mira Riddle, assistant to the Executive Secretary.

Dr. Moser announced that Dr. G. Fred Hale of Raleigh had resigned from the North Carolina Medical Care Commission because of ill health. It was noted that Dr. Hale had represented the Society on the Commission for the past twelve years and during that period he had rendered devoted and distinguished service to the Commission, the profession and to the public.

Dr. Moser informed the Executive Committee that he was recommending to Governor Hodges, that Dr. H. Royster Chamblee of Raleigh be appointed to the Commission to replace Dr. Hale for the unexpired portion of his term. Dr. Hale's term on the Commission was to expire June 30, 1959. The Executive Committee unanimously approved Dr. Moser's recommendation.

Dr. E. U. Austin, Chairman of the Legislative Committee was recognized. He stated that representatives of the Committee had held several conferences with representatives of the Blue Cross-Blue Shield Agencies in North Carolina and the North Carolina Commissioner of Insurance concerning the matter of direct payments to dentists for services performed. In his opinion, little progress had been made through these negotiations and he thought that efforts to have the insurance laws amended by legislative action would be necessary to accomplish the objective.

Dr. Ross reported that he had been in communication with the Blue Cross-Blue Shield Agencies within the past few days and that they had indicated that they would be willing to offer to their policy-holders a rider which would allow dentists to receive payment for services rendered for a limited number of procedures normally performed by dentists. The cost of the rider is to be determined on the basis of the estimated cost of the rider to the company and by consultation with representatives of the Society. This rider was necessary for the time being, Dr. Ross explained, in order for the company to determine by experience the exact cost to the company of this added benefit to the policy-holder. Further, the Blue Cross-Blue Shield companies agreed that there was the possibility that after a period of experience with the rider that the rider itself might be eliminated, and that direct payment to dentists for certain procedures might be made a part of the basic contract offered to all policy-holders.

The Executive Committee requested the Legislative Committee to study carefully the proposal of the Blue Cross-Blue Shield Agencies as outlined by Dr. Ross, and to submit to the Executive Committee at a later date its recommendations on the matter.

Mr. Cunningham announced that in the recent mail ballot all seven members of the Executive Committee voted to approve the Report of the Advisory Committee to the School Health Co-ordinating Service, dated October 30, 1958. The report included a proposed State-Wide Uniform Schedule of Dental Fees and a Recommended Policy for Handling Indigent Cases on a Local Level. The unanimous vote approving the report is now made a matter of record.

Dr. Butler moved to reconsider the vote by which the Report of the School Health Co-ordinating Service, dated October 30, 1958, was approved. Dr. Teague seconded the motion and it was carried.

Dr. Teague moved that the Report of the School Health Co-ordinating Service, dated October 30, 1958, be recommitted to the Committee with

the recommendation that the fees included in the schedule be reduced to reflect fees more in keeping with those charged indigent cases. Dr. Sherrod seconded the motion and it was carried.

There being no further business the meeting was adjourned at 1:05 a.m. on motion by Dr. Teague, seconded by Dr. Sherrod and duly carried.

Read and approved January 10, 1959

LUTHER H. BUTLER
Secretary-Treasurer

THE CAROLINA, PINEHURST, NORTH CAROLINA

January 10, 1959

The Executive Committee of the North Carolina Dental Society convened at The Carolina, Pinehurst, North Carolina, January 10, 1959. The meeting was called to order by Dr. Norman F. Ross, Chairman at 8:55 p.m. Dr. Luther H. Butler led in prayer.

Members of the Executive Committee present were: Doctors Norman F. Ross, Chairman; S. E. Moser, W. B. Sherrod, Charles H. Teague, Luther H. Butler, M. H. Truluck and R. B. Barden.

Others present were: Doctors C. C. Poindexter, W. E. Clark, E. U. Austin, S. P. Gay, T. G. Nisbet, B. B. Sapp, Jr., and S. H. Isenhower; Mr. Andrew M. Cunningham, Executive Secretary and Miss Mira Riddle, assistant to the Executive Secretary.

The Chairman recognized Dr. Poindexter, Chairman of the ADA Centennial Committee (liaison). Dr. Poindexter outlined his Committee's plans for the observance in North Carolina of the 1959 Centennial of the American Dental Association. They included civic luncheons, special emphasis on Children's Dental Health Week and the selection of a "Dentist of the Century" in North Carolina.

Dr. Teague moved the ADA Centennial Committee proceed with their plans as outlined by Dr. Poindexter and that announcement of the "Dentist of the Century" be made at the 103rd Annual Session. Dr. Butler seconded the motion and it was carried.

The minutes of September 28, 1958 and December 6, 1958 were read and approved.

The Chairman then recognized Dr. Austin, Chairman, Legislative Committee. Dr. Austin reported that he had written the Hospital Savings Association of Chapel Hill and the Hospital Care Association of Durham expressing the desire of the Legislative Committee to meet with their representatives at their convenience to discuss the proposed rider to the policies of these associations which would permit dentists to be paid directly for services performed. Dr. Austin stated that to date he had not received replies to his letters.

Dr. Truluck moved that Dr. Austin, as Chairman of the Legislative Committee, initiate a meeting with representatives of the Blue Shield-Blue Cross companies for the specific purpose of arriving at a solution to the problem of the proposed rider. Dr. Barden seconded the motion and it was carried. It was suggested that this meeting be held in January prior to the convening of the General Assembly of North Carolina.

A Membership Report presented by Mr. Cunningham, Executive Secretary, showed that there were 1,047 members in the Society as of December 31, 1958. The report also indicated that as of January 9, 1959, 764 members had paid their 1959 dues.

It was noted from the report, and made a matter of record, that the following had not paid their 1958 dues as of December 31, 1958 and would be automatically dropped from the roll according to the Constitution and By-Laws:

First District: F. E. Hendricks, Waynesville; L. C. Rollins, Canton.

Second District: L. Dale Arthur, Charlotte.

Third District: Clell S. Caldwell, Durham; John T. Gobbel, Jr., Fort Lauderdale, Florida.

Fourth District: George E. Dennis, Raleigh; Donald McGowan, Raleigh.

Fifth District: J. M. Anderson, New Bern.



Top: Dr. Walter T. McFall presiding at a meeting in behalf of Dr. Paul E. Jones of Farmville, candidate for Trustee of the Fifth District.

Middle: The Past Presidents enjoyed themselves (and Dr. Frank Alford's stories) at their annual Breakfast.

Bottom: Renewing old times were: (left to right) Drs. Frank O. Alford of Charlotte, R. M. Olive and D. L. Pridgen, of Fayetteville. They practiced together in the 1920's. All three are Past Presidents of the Society and Fellows in the American College of Dentists.

Dr. Truluck moved that a committee consisting of the Secretary-Treasurer, Chairman of the Executive Committee and the Executive Secretary select a suitable award of recognition to be presented to the out-going President. It was noted that the supply of President's Emblems, previously awarded had been exhausted. Dr. Barden seconded the motion and it was carried.

The Executive Secretary reported that the Society had received a check in the amount of \$50.00 from the Council on Hospital Dental Service of the American Dental Association to defray some of the expenses of two of the members of the Hospital Dental Service Committee for inspecting dental departments.

The Society was advised that the following had inspected the dental departments on the dates indicated: Dr. A. T. Jennette, Veterans Administration Hospital, Fayetteville, October 15, 1958; and Dr. Thomas L. Blair, Veterans Administration Hospital, Salisbury, October 15, 1958. It is the policy of the Council to send an honorarium of \$25.00 to the constituent society concerned for each dental department examined at the request of the Council.

Dr. Truluck moved that Drs. Jennette and Blair be advised that the honorarium had been received and was available at their request, otherwise the money would be deposited to the credit of the Development Fund in their names. Dr. Moser seconded the motion and it was carried.

Dr. Teague moved that state dues not be waived for members engaged in post-graduate study. The motion was seconded by Dr. Sherrod and it was carried.

Dr. Truluck moved that a memorial be prepared by the Secretary-Treasurer in tribute to Dr. E. A. Branch, Director of the Division of Oral Hygiene, a past president of this Society and life member of the Fourth District, who died December 3, 1958; and that the tribute be recorded in the minutes of the Executive Committee. Dr. Barden seconded the motion and it was carried.

A letter dated January 7, 1959 was received from Dr. M. L. Cherry, Chairman of the Executive Committee of the Third District Dental Society, complaining of the ungentlemanly conduct of Mr. Henry Swanzey of the Charlotte Dental Laboratory at the Third District meeting last fall, and requesting that Mr. Swanzey be restrained from attending state or district meetings or advertising in the publications of the Society for a period of one year.

Dr. Teague moved that Mr. Swanzey not be allowed to attend or exhibit at State meetings, or advertise in the publications of the Society for one year. After a period of one year, Mr. Swanzey may apply to the Executive Committee to have these privileges restored. The motion was seconded by Dr. Butler and it was carried.

Authority was granted to the Secretary-Treasurer to employ the services of a stenotypist and necessary registrars for the 103rd Annual Session.

There being no further business, the meeting was adjourned at 12:50 a.m. on motion by Dr. Truluck, seconded by Dr. Teague and carried.

Read and approved January 17, 1959

LUTHER H. BUTLER
Secretary-Treasurer

ERNEST ALEXANDER BRANCH
May 16, 1888-December 3, 1958

With deepest sorrow, the Executive Committee of the North Carolina Dental Society records the death of Ernest Alexander Branch, D.D.S., F.A.C.D. on December 3, 1958.

Dr. Branch was a Life Member of this Society and served as its President 1933-1934.

For thirty years Dr. Branch was Director of the Division of Oral Hygiene of the North Carolina State Board of Health. Because of his fruitful labors in this capacity and in the whole field of Public Health Dentistry, Dr. Branch was the recipient of many honors, richly deserved and modestly accepted.

The North Carolina Public Health Association conferred upon him the Carl R. Reynolds Award in 1952 for his promotion of the fluoridation of municipal water supplies in North Carolina to reduce the incidence of dental caries in children.

In 1953, the North Carolina Dental Society cited Dr. Branch for his contribution to the cause of better dental health in North Carolina; and in 1957 Dr. Branch received a citation from the American Association of Public Health Dentists for distinguished service and leadership in the advancement of dental health.

Dr. Branch had a great compassion for his fellowman and particularly for the school children throughout the length and breadth of this state who learned the first rudiments of good dental health through his efforts and initiative as Director of the Division of Oral Hygiene.

We who knew and loved Dr. Branch, desire to record in the Minutes our deep sense of loss on his passing and our sincere sympathy for his wife and the members of his family.

January 10, 1959

THE CAROLINA, PINEHURST, NORTH CAROLINA January 11, 1959

The Executive Committee of the North Carolina Dental Society convened at The Carolina, Pinehurst, North Carolina, January 11, 1959. The meeting was called to order by President S. E. Moser at 10:15 a.m. Dr. Walter T. McFall led in prayer.

Members of the Executive Committee present were: Doctors S. E. Moser, W. B. Sherrod, C. H. Teague, L. H. Butler, Norman F. Ross, R. B. Barden and M. H. Truluck.

Members of the Convention Committee present were: Doctors S. H. Isenhower, Chairman; S. P. Gay, Clinics; T. G. Nisbet, Program; W. T. McFall, Entertainment of Out-of-State Visitors; B. B. Sapp, Jr., Visual Education and Scientific Exhibits; Guy R. Willis, Exhibits; W. K. Griffin, Golf; R. B. Warlick, Entertainment; C. C. Poindexter, ADA Centennial.

Others present were: Mr. Andrew M. Cunningham, Executive Secretary and Miss Mira Riddle, assistant to the Executive Secretary.

Reports were presented from the members of the Convention Committee present.

Reports were also submitted in absentia by W. H. Branch, Housing; D. F. Hord, Monitor; B. A. Brawley, Necrology; D. A. Price, Dental Hygienists. All expressed their regrets that they were unable to attend in person.

It was suggested that the Monitor Committee assign two men to each door at all the meetings during the Annual Session or a total of four men each meeting. This would make two men available to handle the floor microphones when needed and still have a man on duty at each door. Also, it was suggested that arm bands be provided for the Monitor Committee.

The Committee recessed at 12:30 and reconvened in Executive Session at 12:40 with Dr. Ross presiding.

Dr. Barden led the group in prayer.

On motion by Dr. Truluck, seconded by Dr. Butler and duly carried the proposed budget for the 103rd Annual Session was adopted as follows:

Convention	\$ 1,550.00
Exhibits	1,450.00
Entertainment	950.00
Entertainment of Out-of-State Visitors.....	150.00
Housing	75.00
Necrology	20.00
Program	2,000.00
Monitor	15.00
Publicity	250.00
Clinic	15.00
Superintendent of Clinics.....	20.00

House of Delegates.....	75.00
Golf	150.00
Skeet-Shoot	30.00
Total	<u>\$ 6,750.00</u>

Dr. Barden moved that a special meeting of the Executive Committee be held in Raleigh, January 17, 1959 at 4:00 p.m. for the purpose of outlining definite action to be taken in regard to the problem of securing direct payment to dentists by the Hospital Savings Association of Chapel Hill and the Hospital Care Association of Durham for services normally performed by dentists. The Legislative Committee and three oral surgeons are to be invited to attend and participate in the meeting. The motion was seconded by Dr. Moser and it was carried.

There being no further business, the meeting was adjourned at 1:20 p.m. on motion by Dr. Barden, seconded by Dr. Truluck, and carried.

LUTHER H. BUTLER

Read and approved January 17, 1959

Secretary-Treasurer

CENTRAL OFFICE, RALEIGH, NORTH CAROLINA

January 17, 1959

The Executive Committee of the North Carolina Dental Society convened at the Central Office, Raleigh, North Carolina, January 17, 1959. The meeting was called to order by Dr. Norman F. Ross, Chairman, at 4:20 p.m. Dr. W. B. Sherrod led in prayer.

Members of the Executive Committee present were: Doctors Norman F. Ross, Chairman; W. B. Sherrod, C. H. Teague, R. B. Barden, and L. H. Butler.

Others present were: Dr. C. C. Diercks, Editor-Publisher; Dr. E. U. Austin, Chairman, Legislative Committee; Dr. Guy R. Willis, member, Legislative Committee; Dr. T. E. Sikes, Sr.; Mr. Andrew M. Cunningham, Executive Secretary; and Miss Mira Riddle, assistant to the Executive Secretary.

The minutes of January 10, 1959, were read and approved on motion by Dr. Sherrod, seconded by Dr. Teague and carried.

The minutes of January 11, 1959, were read and approved on motion by Dr. Barden, seconded by Dr. Sherrod and carried.

A request from the North Carolina Academy of Science for a contribution for the current year of \$100.00 for the purpose of the Science Fairs movement in North Carolina was referred to the Science Fair Committee.

Dr. Butler reported that he had made a further effort to have contributions to the Development Fund declared tax deductible by the Internal Revenue Department in Greensboro, but without success.

The problem of direct payments to dentists by the Blue Shield-Blue Cross Companies was then discussed. Dr. Ross pointed out that it was the purpose of this meeting to clarify the position of the North Carolina Dental Society in the matter, and to instruct the Legislative Committee in their future negotiations.

Dr. Austin, Chairman of the Legislative Committee, was recognized. He summarized the Legislative Committee's efforts to date to secure direct payments to dentists by the Blue Shield-Blue Cross Companies for procedures listed in the policies of both companies and legally and normally performed by dentists.

He reported that following the January 11, 1959 meeting, he had discovered a communication dated December 15, 1958 from Mr. E. B. Crawford of the Hospital Savings Association, stating that he and Mr. Herndon of the Hospital Care Association would confer and draw-up a proposed rider to cover procedures for which the companies would make direct payments to dentists. Further, Mr. Crawford stated that a proposal would be submitted to the Legislative Committee of the Dental Society for its consideration probably some time between January 15 and January 20.

Following a lengthy discussion of the problem, the Executive Committee agreed to continue along the lines outlined at the January 10, 1959, meeting. It was the consensus of the Executive Committee that the hospital associations were acting in good faith in proposing a rider and that every consideration must be given to this proposal before efforts were made to secure remedial legislation in the General Assembly of the State of North Carolina. It was suggested that in the forthcoming meeting with the hospital associations that the latter be asked to simply add to their contracts the words "or dentists" as applied to the procedures in question.

There being no further business, the meeting was adjourned at 8:05 p.m. on motion by Dr. Butler, seconded by Dr. Sherrod and carried.

LUTHER H. BUTLER
Secretary-Treasurer

Read and approved May 2, 1959

THE CAROLINA, PINEHURST, NORTH CAROLINA

May 2, 1959

The Executive Committee of the North Carolina Dental Society convened at the call of the Chairman at The Carolina, Pinehurst, North Carolina, Saturday, May 2, 1959 at 8:45 p.m.

Members of the Executive Committee present were: Doctors Norman F. Ross, Chairman; S. E. Moser, W. B. Sherrod, Luther H. Butler, Charles H. Teague and M. H. Truluck.

Others present were: Doctors Ralph D. Coffey, S. B. Towler and T. G. Nisbet; Mr. Andrew M. Cunningham, Executive Secretary and Miss Mira Riddle, assistant to the Executive Secretary.

The meeting was called to order by Dr. Ross and Dr. Coffey led in prayer.

The minutes of January 17, 1959 were read and approved on motion by Dr. Teague, seconded by Dr. Sherrod.

The Secretary-Treasurer's report as of April 30, 1959 was approved on motion by Dr. Moser, seconded by Dr. Sherrod.

A State-wide Uniform Schedule of Dental Fees for the School Health Co-ordinating Service (copy attached to these minutes) submitted by the Advisory Committee to the School Health Co-ordinating Service was approved on motion by Dr. Butler, seconded by Dr. Truluck.

On motion by Dr. Butler, seconded by Dr. Truluck, it was voted to give Dr. Sandy C. Marks an honorarium of \$75.00 for his presentation at the 103rd Annual Session, and that the Society pay the hotel expenses of Dr. & Mrs. Marks during their stay at Pinehurst.

On motion by Dr. Butler, seconded by Dr. Moser, the expenses of the Executive Secretary while attending the Hinman Clinic in Atlanta, March 16 were approved for payment.

It was noted by the Chairman that this would be the final meeting of the Executive Committee during the current year and therefore the last meeting over which he would preside. He thanked the members for their co-operation during his term of office and expressed his appreciation for their support.

Dr. Sherrod, President-Elect, announced that the new Executive Committee would meet immediately following the adjournment of the 103rd Annual Session on Wednesday, May 6, 1959.

There being no further business, the meeting was adjourned at 10:45 p.m. on motion by Dr. Truluck, seconded by Dr. Butler.

LUTHER H. BUTLER, D.D.S.
Secretary-Treasurer

Read and approved June 20, 1959

P R O P O S E D

STATE-WIDE UNIFORM SCHEDULE OF DENTAL FEES
SCHOOL HEALTH CO-ORDINATING SERVICE

1. Prophylaxis	\$ 3.00
2. Fillings	
a. Amalgam (fee includes base)	
One surface (maximum, two per tooth)	2.50
Two surface	4.50
Three or more surfaces	6.50
b. Cement	3.00
c. Silicate cement	3.00
3. Extractions	
a. Each extraction	2.50
b. Impacted teeth	10.00-20.00
(accompanied by X-Ray film showing impaction)	
c. General Anesthetic	5.00
4. X-Rays	
a. Intra-oral:	
First film	3.00
Each additional film (to 8 films)	1.00
Whole mouth	12.00
b. Extra-oral	7.50
(to be authorized in accident cases only)	
5. Crowns	
Stainless steel or band amalgam	9.00
6. Dentures	
a. Full upper or lower, acrylic	60.00
b. Partial upper or lower, without clasp, any number of teeth	35.00
c. Acrylic appliance for correcting anterior teeth in linguo-version	35.00
d. Repairs:	
Acrylic, simple	8.00
Each tooth replaced in addition	2.00
7. Fractures:	
a. Reduction of simple fracture, not requiring any wires or splints	20.00
b. Reduction of fractures requiring open reduction, extensive wiring, splints or head-cap	125.00
8. Root Canal Therapy	
Extirpation of pulp and filling of one root canal, anterior	25.00

Approved by the Executive Committee of the North Carolina Dental Society May 2, 1959.

Obituaries

C. MICHEAUX BEAM, D.D.S.
ERNEST A. BRANCH, D.D.S.
ARTHUR HYNES FLEMING, D.D.S.
LILL GASTON HAIR, D.D.S.
PAUL T. HARRELL, B.A., D.D.S.
RALPH R. HOWES, D.D.S.
SAMUEL HORACE MCCALL, D.D.S.
CLEVELAND MCCLURE PEELER,
D.D.S.
WADE COLEMAN RAYMER, D.D.S.
JASPER WILLIAM STANLY, D.D.S.
WILLIAM HARRISON VANDER LINDEN,
D.D.S.
JOSEPH CONRAD WATKINS, D.D.S.

CALVIN MICHEAUX BEAM, D.D.S. 1883-1959

Calvin Micheaux Beam, D.D.S., died in an Asheville hospital at 3:15 p.m., Saturday, May 24, 1958 as the result of an injury received in an automobile accident two days previously. Funeral services for Dr. Beam were conducted in Asheville, on Sunday, May 25, 1958.

Dr. Beam was born in Shelby, North Carolina, February 22, 1883, the son of David Augustus and Elizabeth Micheaux Beam. His mother was a descendant of Andre Micheaux, the famed French botanist who pioneered in the study of flora of Western North Carolina. His father was a grandson of Margaret Jane Wells, whose mother was Elizabeth Weaver, the daughter of Jacob Weaver, an early settler in Western North Carolina.

Dr. Beam received his early education at Shelby High School and was graduated from Atlanta Dental College in 1905 with the degree of Doctor of Dental Surgery. In 1916 he moved from Charlotte to Asheville, where he practiced dentistry and was a member of the First Baptist Church for forty-two years.

He was a member of the American Dental Association, the North Carolina Dental Society, the First District Dental Society, the Loyal Order of the Moose, the B.P.O.E., and the Buncombe County Wildlife Club. He served as Vice-President of the Asheville Alumni Association of Emory University School of Dentistry.

Dr. Beam's hobby was fishing, and he was on a fishing trip when he was fatally injured.

William D. Yelton, D.D.S.

ERNEST A. BRANCH, D.D.S. 1888-1958

On December 3, 1958, Dr. Ernest A. Branch was called to his eternal reward. His death was a great loss to dentistry and to public health. For thirty years Dr. Branch served as Director of the Division of Oral Hygiene of the North Carolina State Board of Health. Many years of careful thought and study, of testing and experimenting, resulted in the development of sound policies and practices which have made the program of Dental Public Health in North Carolina second to none in the nation.

Dr. Branch, more than any other public health worker, knew our state, its people, and their needs. He dedicated a life of service and devotion to the cause of better dental health for the citizens of North Carolina. He recognized with gratitude and appreciation the contributions of others. He never sought acclaim for himself. In accepting the many honors bestowed upon him, he did so with humble and gracious thanks, not only for himself, but also for all who had contributed to his achievements.

The dental profession of our state, collectively and individually, are the beneficiaries of his sincerity, wisdom, and zeal in promoting and protecting the highest professional and ethical standards, thus adding im-

measurably to the prestige and stature of dentistry in our state. We mourn the passing of our loved one whose endearing personality, unusual gift of expression, superior intellect, keen sense of humor, and sympathetic nature made him a dominant figure among his fellows.

We will cherish the memory of Dr. Branch as a great leader, teacher, and counselor; as a good man; and as a dear friend.

Dr. Branch was born on May 16, 1888 in Lumberton, North Carolina. He attended the Lumberton Public Schools, Oak Ridge Institute, and Atlanta Dental College, from which he received the degree of D.D.S. in 1913. He engaged in the private practice of dentistry in Norwood, North Carolina, from 1913 to 1922. He became public health dentist for Wake County in 1922 and continued in this capacity until 1927. From 1927 to 1929 Dr. Branch carried on a private practice in Raleigh. In 1929 he became the Director of the Division of Oral Hygiene of the North Carolina State Board of Health, which position he held until his death.

Dr. Branch held membership and was active in the affairs of the Fourth District Dental Society, the North Carolina Dental Society, the American Dental Association, the State and Territorial Dental Directors' Association, the American Association of Public Health Dentists, the North Carolina Public Health Association, and the American Public Health Association.

He was a Fellow of the American College of Dentists and a Diplomat of the American Board of Public Health Dentistry. Dr. Branch was President of the North Carolina Dental Society in 1934, of the American Association of Public Health Dentists in 1941-1942, of the North Carolina Public Health Association in 1948-1949, and of the Association of State and Territorial Dental Directors in 1949-1950.

In addition to Mrs. Branch, he is survived by two daughters, Mrs. Robert G. B. Bourne of Raleigh, and Mrs. Robert Burrage of Concord. He is further survived by seven grandchildren, two sisters, and a brother.

Dr. Branch's funeral was held at the Pullen Memorial Baptist Church, of which he was a member, on December 5, 1958. The Reverend William Finlator conducted the service. One of his prayers so fittingly expressed the feeling of all who knew Dr. Branch, that we quote from it:

"We thank Thee for the gracious memories that gather around the gentle soul departed; for his simple creed of kindness and good will; for his love freely given and modestly received; for his freedom from sham and pretense; for his love, like the Saviour's, for flowers and children; for his early discovery of the adventure of his special service and his unswerving loyalty and quick responsiveness in doing it; for all in home and in friendship that made him lovable; and now at last for his quiet release from the burden of the flesh and an abundant entrance into the peace prepared for those that love Thee and serve Thee."

E. A. Pearson, Jr., D.D.S.

ARTHUR HYNES FLEMING, D.D.S.
1881-1958

Born in Raleigh, 1881—died in Louisburg, September 6, 1958. Dr. Fleming was graduated from the University of Pennsylvania Dental School in 1902. He resided in Louisburg, North Carolina, where he conducted a general practice up until recent years. Ill health caused him to give up his practice. This, however, did not lessen his enthusiasm for his profession and colleagues.

Dr. Fleming was a member of the Fourth District Dental Society of North Carolina, and the North Carolina Dental Society, as well as the American Dental Association, from 1902 until his death, being a life member in the North Carolina Dental Society. He held many offices in both the District and State Dental Societies. He served as President of the North Carolina Dental Society in 1910-1911. He made many literary contributions to the JOURNAL of The North Carolina Dental Society.

Dr. Fleming's interest in community activities was manifested in the development of rural county fairs. He had been actively engaged in this

work for many years, and was considered the Dean of North Carolina Fair Secretaries.

Funeral services were held for Dr. Fleming in the White Funeral Home in Louisburg. Interment was in Oakwood Cemetery, Raleigh.

E. A. Pearson, Jr., D.D.S.

LILL GASTON HAIR, D.D.S.
1884-1958

Dr. Lill Gaston Hair was born in the Cedar Creek Community of Cumberland County on April 8, 1884. He attended White Oak grade school, later attending and graduating from Oak Ridge Military Academy. This same year, 1908, found him starting on his long and successful career in dentistry, when he entered Atlanta Dental College, now Emory University School of Dentistry. From there he graduated in the class of 1911, immediately returning to Fayetteville to open an office and to practice in his chosen profession continuously for the following forty-seven years.

On November 6, 1913, he was married to Burline Downing of Fayetteville, to whom were born six children, four living today. He and his family have been lifelong members of the First Baptist Church here, where he was an active worker.

Next to his family, dentistry won his love and his devotion. In that field, we who live on shall continue to see his wonderful handiwork serving his fellowman's need for many years to come. Through his life's example, one of his sons, J. Stacey, was inspired to study dentistry, and entered into an association with him here, where he continues to practice today.

Dr. Hair was an active associate of the late Dr. Henry Lineberger in the formation of The Dental Foundation of North Carolina, to which I am sure he gave substantially. He was a Life Member of the American Dental Association and of the Cumberland County Dental Society, being regular in attendance and active, always adding interest and gaiety and inspiration by his presence.

Being a farm boy, he could never lose his love for the soil, and acquired considerable lands during his busy life, first as a hobby, later developing into a sizable business, but creating a great joy and pleasure for his outdoor life.

He was active in his office and managing his farmlands until the Wise Creator took him unto Himself at the age of 74 years, on June 13, 1958.

Newton Smith, D.D.S.

PAUL T. HARRELL, B.A., D.D.S.
1914-1958

Paul Harrell was born in Cofield, North Carolina, on June 23, 1914, the son of Mr. and Mrs. H. T. Harrell. After attending the schools at Cofield and Harrellsville, North Carolina, he entered the University of North Carolina from which he graduated in 1935. Upon graduation, Paul began the study of dentistry at Medical College of Virginia in Richmond, Virginia, graduating in 1939. After receiving his license he began practicing dentistry in Wake Forest, North Carolina, and continued to practice in Wake Forest until his death on July 5, 1958.

Paul Harrell was a member of the Fourth District Dental Society, and served as our Secretary-Treasurer and later as President. He was such a quiet unassuming man that he never sought office but served when called, with enthusiasm and excellence in every way. He was a member of the North Carolina Dental Society and attended the meetings regularly. He also belonged to the American Dental Association, the North Carolina Society of Dentistry for Children, and the Seaboard Dental Society.

He was a member of the Wake Forest Rotary Club and served in almost every office of the club, including the presidency. He was a Mason and a member of the Wake Forest Baptist Church, where he was on the Board of Deacons for many years. Paul belonged to every club and

organization which was for the betterment of his community and nation, and always served well.

Paul Harrell was one of the finest Christian gentlemen our community has ever known. Never has anyone heard this gentle man ever say a word of harm about anyone. He went about life doing his best and always taking a back seat, but a very dynamic one. He was an excellent dentist, devoted to and loved by his patients, and completely fair and honest with people in every way. One of our town's finest citizens had this to say about Paul, "If Paul doesn't make it to heaven, the rest of us need not try."

Paul loved to hunt and fish, and all of the out-of-doors. He was a baseball player at the University of North Carolina, and also at the Medical College of Virginia. His later sports included soft ball and golf, which he loved and played with enthusiasm.

Most of all, Paul loved his wife and family. He was truly a family man and made a fine home for them. He always found time to visit and write to his parents, and honored them to the very fullest extent. His last year was a very hard one, for he was taken with a dreaded disease, but no one ever heard him complain. His same smile was present to the end, to his patients and friends, despite the pain and mental anguish which was his at knowing his condition.

Dr. Paul Harrell was married to the former Nora Russell of Warrenton, North Carolina, and was the father of two fine children, Paul T., Jr., aged 9, and Nora Ellen, aged 6. They, as well as everyone who knew Paul, were completely devoted to him. He was an inspiration to all who knew him and will be sorely missed by all of us.

Paul passed away in his sleep on July 5, 1958, at an unusually early age. His life would be an inspiration to everyone.

Nash H. Underwood, D.D.S.

RALPH R. HOWES, D.D.S.
1896-1958

Born Liberty, Maine, February 12, 1896.

Died Rutherfordton Hospital, June 7, 1958.

Buried St. Thaddeus Cemetery, Aiken, South Carolina.

Dr. Ralph R. Howes attended Maine Central Institute at Pittsfield, Maine, where he won his letter in track, was a member of the basketball team, and debating team. He graduated in June 1914, and then entered Colby College at Waterville, Maine, in September of 1914. He was a member of the track and debating teams there, and of Alpha Tau Omega Fraternity.

He completed two years, and then enlisted in the medical corps of the United States Navy in July 1916, serving four years on the "USS Kentucky," "Chebaulip," at Navy Hospital, Washington, and the Philadelphia Navy Yard Dispensary. While on duty in Washington he met his future wife, to whom he was married in December of 1920.

In September of 1920 he entered the freshman class of the Dental College of Tufts College, from which he was graduated, cum laude, in June 1924. Here he became a member of the Delta Sigma Delta Fraternity and the R. R. Andrews Scholastic Society (Honorary). At graduation, one outstanding student from each college was chosen to present a paper. This honor was given to Ralph, and his paper was, "Dentistry and the Child." (Since the North Carolina State Examiners were holding examinations for the North Carolina Board at the same time as graduation, he was unable to give the paper in person.)

Having successfully passed the Board, he established an office in Forest City, North Carolina, and opened his practice here October 1, 1924. During the years he was a member of the Isothermal Dental Society, in which he was vitally interested, the State Society and the National Society. He was an active member of the Rod and Gun Club, an avid bear hunter, and golfer.

He was a member in good standing in the Episcopal Church, serving on the Vestry of St. Francis Episcopal Church, Rutherfordton, for several

terms. He was a twenty-five-year member of the American Legion, and past president of the Kiwanis Club of Forest City. He served on the Dental Examining Board for draftees during World War II.

Dr. Howes is survived by his widow, three daughters, and four grandchildren.

J. O. Thorpe, D.D.S.

SAMUEL HORACE MCCALL, D.D.S.

1884-1959

Samuel Horace McCall, D.D.S., was born in North Cove, McDowell County, North Carolina, on April 28, 1884. He was the son of Sam and Jennie Brown McCall.

Dr. McCall graduated from Baltimore College of Dental Surgery, University of Maryland Dental College, in 1907. He was a member of the Xi Psi Phi Fraternity, ETA Chapter. Dr. McCall was licensed in North Carolina on June 24, 1907, in Virginia on July 19, 1913, and in Maryland on July 5, 1915. He graduated from Hashell Post Graduate Dental College on November 10, 1910, and from the Philadelphia Optical College in September 1910. He was a Master Optician. He was made a Life Member of the A.D.A. in 1952.

Sam McCall began practice in Montgomery County in 1907. In 1910, he married Monnie McIntyre. He is survived by his widow, one son, S. H. McCall, Jr., and three grandchildren.

Dr. McCall was an Elder in Troy Presbyterian Church.

Samuel Horace McCall will be greatly missed by his many friends and fellow members of the dental profession.

Thomas A. Kornegay, D.D.S.

CLEVELAND McLURE PEELER, D.D.S.

1885-1958

Dr. C. M. Peeler, 73-year-old Shelby dentist, was born in Casar, North Carolina, June 22, 1885. He died on November 19, 1958.

Dr. Peeler was a graduate of Piedmont High School and Rutherford College. He received his dental degree from Atlanta Southern Dental College in 1910. He practiced his profession in Casar for eight years before locating in Shelby.

He was a Life Member of the North Carolina Dental Society, a member of Cleveland Lodge 202 of the Masonic Order, a Shriner of the Oasis Temple, and a member of the Central Methodist Church.

Surviving Dr. Peeler is his wife, Mrs. Ethel Eaker Peeler, three sons, George B. of Rock Hill, South Carolina; Hugh, of Shelby; and C. M. Jr., of Houston, Texas; one sister, Mrs. Evans Shull of Shelby; and eleven grandchildren.

Hubert Plaster, D.D.S.

WADE COLEMAN RAYMER, D.D.S.

1892-1959

Dr. Wade Coleman Raymer was born in Iredell County, North Carolina, on March 16, 1892. He was the son of the late Charles Augustus Raymer and Laura Little Raymer. He attended the Iredell County Schools, the Statesville Academy, and was graduated from Lenior-Rhyne College in 1910. He received his Doctor of Dental Surgery degree from Atlanta Southern Dental College in June of 1917.

He began the practice of dentistry in Catawba, North Carolina, immediately after graduating. On October 15, 1917, he was married to Miss Maude Smith of Catawba. In April 1919, he moved his practice to Newton, North Carolina, where he enjoyed a wide and active practice for thirty-five years. He was loved by all of his patients, and particularly by his children patients, for whom he had great skill.

He was a Mason, a former member of the Newton Kiwanis Club, and a member of the Lutheran Church. He was a member of Catawba Lodge A.F. and A.M. of Newton, and was a former member of the Riverside Lodge of Catawba.

He was forced to retire from active practice in 1953 due to ill health. Until this time he had been a member of the American Dental Association, the North Carolina Dental Society, the First District Dental Society, and of the Tri-County Dental Society which he helped to organize approximately twenty-five years ago. He was a member of Xi Psi Phi Dental Fraternity.

Dr. Raymer expired in Catawba Hospital in Newton, on Thursday, April 2, 1959. He is survived by his wife and two daughters, Frances and Helen, who are members of the Newton City schools faculty.

Samuel H. Isenhower, D.D.S.

JASPER WILLIAM STANLY, D.D.S.

1877-1958

Jasper William Stanly, D.D.S., was born August 30, 1877, in the town of Whiteville, North Carolina. Dr. Stanly's death occurred at his home in Wilmington, on December 25, 1958. At the time of his death, he was Dean of Practicing Dentists in Wilmington, both in years and in length of active practice.

After receiving his elementary education in the public schools of Columbus County, he entered the Atlanta Southern Dental College, from which institution he was graduated on April 29, 1903. Soon afterwards he began the practice of dentistry in Wilmington, and when he, because of failing health, retired from active practice about 1956, he had rounded out fifty-three years of the practice of dentistry.

Soon after beginning the active practice of dentistry, Dr. Stanly affiliated himself with the North Carolina Dental Society, and was always a regular and consistent attendant at the annual meetings. He held memberships, too, in the American Dental Association; the Fifth District Dental Society of North Carolina; the Wilmington Dental Society. He was a Life Member in all these dental societies. He was on several occasions President of the Wilmington Dental Society. Dr. Stanly in a very high degree possessed the essential qualities to make for a very high type ethical practitioner. As a dental practitioner, his skill and technique and ingenuity were unsurpassed. On many and numerous times at the State and American Dental Societies, he gave clinics.

About fifty years ago Dr. Stanly embraced the religion of the "Old Apostolic Lutheran Church," and during all these years he has lived his religion and was a most courageous protagonist for the beliefs and ideals of his church. Through very strenuous efforts Dr. Stanly had succeeded in erecting a church building for the followers of his faith. He had been ordained a Minister of his faith, and for many years served as pastor of that church.

Let us remember that he has just "passed between the gates," ahead of us, to hear the most wonderful of all words, "Well done, thou good and faithful servant; thou hast been faithful over a few things; I will make thee ruler over many things; enter thou into the joy of the Lord."

He is not dead he has just passed
Beyond the mists that bind us here
Into a new and larger, beautiful life
Of that eternal sphere.

Dr. Stanly is survived by his widow, Mrs. Frances Chadbourn Stanly; and by Mrs. Abbie Farris, Mrs. S. I. Burris, Mrs. R. H. Sneed, of Wilmington, and Mrs. Chester Abernathy, of Yacolt, Washington, and Jack Stanly of Tuscaloosa, Alabama.

C. A. Thomas, D.D.S.

WILLIAM HARRISON VANDER LINDEN, D.D.S.

1889-1958

Dr. William Harrison Vander Linden died May 2, 1958. He was born November 23, 1889, at Pella, Iowa. His parents were members of a group

of Hollanders who founded that town in 1847. After schooling at Pella, he attended Atlanta Dental College, receiving a D.D.S. degree in 1911.

Dr. Vander Linden practiced several years in Georgia, then moved to Hendersonville, North Carolina, and established his practice there. He was a member of the North Carolina National Guard during World War I. He was married to Miss Floride Morris, a member of a pioneer family of that city. While in Hendersonville, he was a member of the Kiwanis Club, Chamber of Commerce, City Council, and other community organizations. He was a Thirty-second Degree Mason.

Dr. Vander Linden moved his family to Hickory in 1933 in order to educate his children at Lenoir-Rhyne College, where they all received degrees. In 1948 he received serious burns from a fire in his office, and was forced to curtail his practice greatly.

He was for many years Secretary-Treasurer of the Tri-County Dental Society, and active in other organizations in Hickory, and a member of the First Presbyterian Church.

He is survived by his widow, two sons, two daughters, and eight grandchildren.

G. Shuford Abernethy, D.D.S.

JOSEPH CONRAD WATKINS, D.D.S.

1874-1959

Dr. Joseph Conrad Watkins died on January 5, 1959. He was 85 years old, and had practiced dentistry in Winston-Salem for more than half a century. Dr. Watkins had been in declining health for several years, and seriously ill since December 22, 1958. He retired in 1952.

Dr. Watkins attended Salem Boys School in Winston-Salem and Wake Forest College, where he received his A.B. and LL.B. degrees in 1897. He was admitted to the North Carolina Bar in 1897, but soon decided that a lawyer's life was not for him. Three years after graduating from law school he received his D.D.S. degree from the University of Maryland, and soon returned to Winston-Salem to begin his practice.

Dr. Watkins was Secretary of the North Carolina Dental Society in 1908 and 1909, and was elected President in 1910. As President, he sponsored a drive which resulted in the establishment of the Department of Oral Hygiene by the State Board of Health. He became chairman of the Society's Oral Hygiene Committee and served with the department from 1910 until 1920. Following this, he returned to Wake Forest to get his Sc.D. (Honorary) degree, which was awarded him in 1922. Three years later he was elected a Fellow of the American College of Dentists.

Dr. Watkins was chairman of the organizational committee for the Second District Dental Society in 1921, and served as President in 1942. He was also active in the Southern Academy of Peridontology, working his way from Secretary in 1923-1924, to President in 1927.

Dr. Watkins was at one time on the staffs of City and Baptist Hospitals in Winston-Salem. He was Chief of City Hospitals Dental Staff from 1937 until 1942. For a number of years he was a member of the teaching staff of Bowman Gray School of Medicine.

Dr. Watkins was a member of Delta Sigma Delta, and Omicron Kappa Upsilon, honorary fraternities, the Winston-Salem Rotary Club; the First Baptist Church; and its Board of Deacons. He was at one time Director of the Forsyth County Board of Health.

Dr. Watkins was a student all his life. Early and late he was on the forefront of the struggle to make his profession an honored one, and one noted for its advancements. His passing leaves a vacancy in our ranks which cannot be filled.

His wife preceded him in death in November 1957. He is survived by two sons and one daughter.

Riley E. Spoon, Jr., D.D.S.
Robert A. George, D.D.S.

Committee Reports

STANDING AND SPECIAL

(In alphabetical order with action
by House of Delegates)

ADA CENTENNIAL COMMITTEE

Wayne County Dental Society, Durham-Orange County Dental Society, Alamance County Dental Society, Charlotte Dental Society, Buncombe County Dental Society and Guilford County Dental Society have expressed intentions of staging some sort of meeting in recognition of the Centennial of the American Dental Association.

On March 24 Durham-Orange County held its regular meeting carrying out the theme of the Centennial in an address by Dr. W. M. Ditto.

On April 17 the Alamance Dental Society will have a similar meeting and Dr. Ditto will speak at that time.

The Charlotte Dental Society is scheduled to carry through the Centennial atmosphere on April 22 and again Dr. Ditto will be the principal speaker.

As of this time neither Buncombe County nor the Wayne County Dental Society has announced specific dates for their meeting.

The Guilford County celebration will be held at the King Cotton Hotel, Greensboro, Tuesday night April 21. United States Senator, Sam J. Ervin will be the featured speaker. It is thought that Senator Ervin's appearance will create considerable interest both to the profession and many laymen, consequently invitations will be mailed to the Mayors of Greensboro, High Point, Asheboro and Reidsville. All county representatives in the General Assembly, Chairman of the Guilford County Commissioners, Superintendent of the Guilford County Schools, Superintendent of the City Schools of Greensboro, the Presidents of four senior colleges in this area, President of the Guilford County Medical Society, Guilford County Health Officer, President of the Greensboro Bar Association, State Health Officer, Director of the Oral Hygiene Department of the State Board of Health, all officers of the North Carolina Dental Society and a number of businessmen of importance in this vicinity. Any success of this particular meeting should go to the efforts of the local committee, Drs. Neal Sheffield, Chairman; Samuel T. Hart, N. C. Johnson, Jr., M. R. Hunter, W. M. Ditto, John D. Southworth, John R. Wheless, J. R. Suggs and T. E. Sikes, Jr.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

C. C. POINDEXTER, *Chairman*

WALTER E. CLARK
D. L. PRIDGEN
WILBERT JACKSON
FRANK O. ALFORD

JOHN R. PHARR
CLYDE E. MINGES
PAUL E. JONES
R. M. OLIVE

Action by the House of Delegates: Accepted by title, May 3, 1959.

CANCER COMMITTEE

During the year the Cancer Committee has worked closely with the North Carolina Division of the American Cancer Society, with your chairman serving on the Board of Directors, the Executive Committee, and the Medical Scientific Committee of that organization. This privileged association has been both helpful and inspirational to your Cancer Committee.

The Oral Cancer Detection Program as outlined in the Cancer Committee report to the North Carolina Dental Society last year, and ap-

proved by the House of Delegates, was accomplished. This project designed to save lives and labeled "Operation Open-Mouth" was a co-operative endeavor by the Durham-Orange County Dental Society, the North Carolina Division of the American Cancer Society and the Cancer Committee of the North Carolina Dental Society. On October 10, 1958, a one-day free oral cancer detection clinic was held simultaneously at Duke Hospital and Watts Hospital in Durham, and at the University of North Carolina School of Dentistry in Chapel Hill. The dentists from the Durham-Orange County Dental Society made the examinations, participated in professional and lay education by appearing on lecture, TV, and radio programs, and assisted in organizational planning without remuneration. The American Cancer Society on a national, state, and local level assisted in the organizational planning; prepared numerous press releases, TV and radio spots; distributed professional and lay education literature and films; arranged for volunteer workers to assist in the clinics; and furnished examination and registration cards.

The joint professional education program for dentists resulted in the following activities and accomplishments:

- 28 Requests for leaflets from individual dentists
- 1,200 Letters and brochures
- 12,000 Leaflets distributed
- 150 Publications to dentists
- 26 Professional film showings
- 520 Attendance at film showings
- 12 Talks to groups of dentists
- 1,180 Attendance at meetings for talks
- 1 Display at State Dental Society Meeting
- 2 Displays at Annual Meeting of American Cancer Society North Carolina Division
- Numerous radio, TV spots and news articles

It is the opinion of your Cancer Committee that the accomplishments in the Oral Cancer Detection project, the professional and lay educational programs, and the harmonious relationship established between the American Cancer Society and your State Dental Society has been an outstanding success. If, in these activities, the participating dentists, the participating public, and the participating agencies have become more alert in the early detection of oral cancer, I am sure that human lives will be saved. The total success of this program will not be known but undoubtedly much has been accomplished. However, I do feel that the program could have been far more successful under different local leadership.

Dr. Nicholas Georgiade, Chairman of the Durham-Orange County Dental Society to co-ordinate the clinics, submits the following results of the Oral Detection Clinic:

Examinations — 900

Leukoplakia	
Oral floor	2
Buccal	22
Biopsies	8
Cervical Adenopathy	16
Thyroid enlargement	4
Torus mandible	32
Palate	23
Gingival Hypertrophy	2
Lesions of lip	8
? Ca Nose	1
Tonsillar Hypertrophy	3
Tongue lesions (Benign)	9
Nevus right cheek	1
Fibroma Buccal Mucosa	1
Aphthous ulcer	3
Submaxillary Duct Calculus	2
Lichen Planus	2

Pharyngeal Inflammation	3
Cyst of Maxilla.....	1

Follow up on biopsies and patients referred back to own physician or dentist reveal one squamous cell carcinoma of mouth treated since examination, one cervical adenopathy treated since examination which was found to be metastatic from lip and one basal cell carcinoma.

Your chairman wishes to express sincere appreciation and thanks for the splendid support and help given by: the members of the Durham-Orange County Society; the staff of American Cancer Society, National, State and Local units; the members of the State Dental Society Cancer Committee; the Board of Directors and the Executive Committee of the American Cancer Society, North Carolina Division.

RECOMMENDATIONS:

That the Secretary of the North Carolina Dental Society write a letter of thanks and appreciation for the help given in the Cancer Detection program by the following organizations:

1. Durham-Orange County Dental Society; Dr. R. W. Sugg, President, 910 Corcoran Building, Durham, North Carolina.
2. The American Cancer Society, North Carolina Division; Mrs. Donald Stone, Executive Secretary, P. O. Box 5547, Raleigh, North Carolina.

M. R. EVANS, *Chairman*

HAROLD PLASTER

GLENN BITLER

T. E. SIKES, JR.

COYTE R. MINGES

L. FRANKLIN BUMGARDNER

Action by the House of Delegates: Adopted, May 4, 1959.

CHILDREN'S DENTAL HEALTH WEEK COMMITTEE

The following methods were used advantageously to promote dental health during the 11th Annual National Children's Dental Health Week:

1. Newspaper coverage
2. Radio and TV spot announcements on Dental Health
3. Civic Club presentations by prominent speakers
4. TV Panel discussions
5. Display of ADA Posters in schools and other public places
6. Classroom talks by dentists in elementary schools

There was a strong effort made in the Charlotte and Raleigh areas to tie dental health education in more strongly with the public school teachings. Dental committees in these two cities met with the superintendents of the public schools to discuss ways and means of carrying this idea out. The theory involved here is to make dental health education for young children a year-round project rather than attempting to concentrate it all in one week.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

STUART A. BARKSDALE, *Chairman*

DONALD L. HENSON

A. C. CURRENT, JR.

C. W. POINDEXTER

A. L. POOVEY

CHARLES A. JARRETT

M. E. NEWTON

J. C. FARTING

C. R. VANDERVOORT

NASH UNDERWOOD

HENRY O. LINEBERGER, JR.

Action by the House of Delegates: Accepted by title, May 3, 1959.

CLINIC COMMITTEE

The Clinic Committee has obtained 25 table clinics for the 1959 meeting.

Participation by districts is as follows:

Seven from the First District

Four from the Second District

Four from the Third District

Four from the Fourth District

One from the Fifth District

The UNC School of Dentistry will present three table clinics.

The N. C. Dental Assistants' Association and the N. C. Dental Hygienists' Association will each present one clinic.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

S. P. GAY, *Chairman*

H. S. RHYNE

WALTER FINCH

CHARLES A. JARRETT

R. FRED HUNT, JR.

Action by the House of Delegates: Accepted by title, May 3, 1959.

CLINIC BOARD OF CENSORS

The Clinic Board of Censors commends all the table clinicians for their excellent presentations and thanks them for their participation in this phase of the annual session.

The following table clinics are being recommended to the American Dental Association for presentation at the Centennial Session in New York, September 14-18, 1959:

1. "Crown and Bridge Procedures," Drs. Norman F. Ross and Baxter B. Sapp, Jr., Durham.

2. "Palliative Orthodontics for the General Practitioner," Dr. W. L. Hand, Jr., New Bern.

3. "Endodontics," Dr. Luther H. Butler, Greensboro.

4. "Fundamentals in Occlusal Equilibrating," Drs. B. N. Walker and G. C. Stowe, Charlotte.

5. "Large Amalgam Restorations," Dr. Robert H. Watson, Charlotte.

RALPH D. COFFEY, *Chairman*

May 6, 1959

CONSTITUTION AND BY-LAWS COMMITTEE

No requests for amendments in our Constitution and By-Laws have been referred to this Committee during the past year.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

Z. L. EDWARDS (1961), *Chairman*

MARCUS R. SMITH (1962)

B. N. WALKER, (1960)

S. W. SHAFFER (1959)

RALPH L. FALLS (1963)

Action by the House of Delegates: Accepted by title, May 3, 1959.

CONVENTION COMMITTEE

Through the particular efforts of the Executive Secretary and the Chairman of the Program Committee the details of the 1959 session of the North Carolina Dental Society are progressing as per schedule.

Each committee chairman will have presented his plans to the President at this time. The co-ordinating of the program has been completed by the Executive Secretary. The physical properties necessary for the clinicians have been obtained through the hotel and the efforts of the Executive Secretary.

The registration table will be set up in the outer lobby of the hotel on Sunday morning May 3. A separate table will be in the outer lobby for the use of the Auxiliary. Placards will be placed in the outer lobby and at the door to the ballroom announcing the program in progress at the time. Name plates and ribbons for identification have been secured by the Central Office. Personnel from the Central Office will be on duty as usual at the registration table.

Monitors will be on duty at the doors to the ballroom and in the lecture hall during the scientific sessions.

Chairs will be placed on the stage for the opening session on Sunday night. Table, glasses, water, rostrum, microphone, etc., will be in place

for this and all sessions when required. An appropriate table will be available for the necrology report on Sunday night. Screens, projectors, blackboards, erasers, chalk, etc., will be available for the sessions as required.

The Program Chairman and his Committee will assume the responsibility of meeting and seeing to the comfort of the clinicians during the meeting. They will secure operators for the projectors during the scientific sessions and will introduce the clinicians.

The Entertainment Chairman and his Committee will be responsible for the decorations and seating at the banquet and dance on Tuesday evening. Place cards and flowers for the special guests and reserved places for the banquet will be the responsibility of the Entertainment Committee.

The allied meetings and sites for the meetings have been cleared through the Executive Secretary and this Committee.

Table clinics will be held on Wednesday morning in the Bridge Room and on the porches near the Bridge Room. The hotel will have protective screens dropped for protection prior to the day of the clinics. The setting up of the clinics shall be the responsibility of the Clinic Committee.

The Golf Committee and Skeet Shoot Committees have made their arrangements with the hotel including the Golf Dinner.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

SAMUEL H. ISENHOWER, *Chairman.*

Action by the House of Delegates: Accepted by title, May 3, 1959.

DENTAL FORMULARY COMMITTEE

The Dental Formulary Committee has been in a state of inactivity since the initial distribution of Dental Formularies at the 1958 meeting of the North Carolina Dental Society in Pinehurst. We have distributed, according to the Central Office in Raleigh, approximately five hundred copies. We will have copies available at Pinehurst for distribution at our state meeting this year.

In the very near future the joint Dental Formulary Committee, from the North Carolina Dental Society and the North Carolina Pharmaceutical Society, will meet to initiate plans for revision of the present Dental Formulary. We have purposely refrained from revising the Formulary thus far. We felt that a sufficient length of time should elapse to allow those who own a copy of the Formulary to digest the contents. We will very probably send out questionnaires to members of both professions for suggestions pertaining to the possibility of improving the contents of the Dental Formulary. After we have thoroughly analyzed the opinions of those interested in the future development of this project, we will then be in a better position to give the members of both professions what they want in a Dental Formulary.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

D. M. GETSINGER, *Chairman*

W. T. BURNS

M. E. NEWTON

H. O. LINEBERGER, Jr.

R. W. SUGG

L. M. MASSEY

Action by the House of Delegates: Accepted by title, May 3, 1959.

COUNCIL ON DENTAL HEALTH AND INFORMATION

This Council is concerned with the various ways and means of improving the dental health of the citizens of our State. It is believed that in order to do this our efforts should and must be directed toward a program which is triangular in structure. The three sides of this triangle are: (1) Prevention, (2) Education, and (3) Service. Needless to say, no one side could ever achieve any degree of success without a well inte-

grated program plan which would involve each of the other sides. Education would be the catalyst in the total program, and the quality and quantity of this catalyst would be the determining factors as to the degree of success. This is borne out in the report of a recent survey conducted by the University of Chicago's National Opinion Research Center in co-operation with the Health Information Foundation. The findings of this survey are that the amount of dental care received varies directly according to income and education. This committee would go so far as to select education, or information, as the more important of the two.

This report will deal, largely, with our State-wide dental health program which combines all sides of the triangle in its motto, "Prevention through education and the early diagnosis and correction of dental defects." For preventive measures to be most effective they must be applied early in life. Therefore, the emphasis must be on providing an effective program of dental health education for the children in the elementary schools of the State. This program of the Oral Hygiene Division of the State Board of Health includes, insofar as funds and staff will permit, the following services:

Classroom instruction and dental inspection for *all* children.

Dental corrections for the underprivileged children.

Referrals to their own dentists for the children whose parents are financially able to take care of their dental needs.

These services are rendered by a staff of public health dentists, now twenty in number, assigned to the local health departments on a fund matching basis. Supporting services are: the presentation of a dental health puppet show; the preparation and distribution of dental health education materials; and the promotion of wide-scale and long-range preventive procedures, notably, the fluoridation of municipal water supplies.

We cite some very definite indications that, through this program, progress is being made in improving the dental health conditions of our people. A very encouraging evidence is that there is an increasing demand, by all ages, for the services of the private practitioners. Even more gratifying are the facts that more and more children are finding their way to dental offices, and that more and more dentists are specializing in children's dentistry. Recent surveys show improvement in dental health conditions. The Oral Hygiene Division is in the process of tabulating the findings of two surveys made in the schools of two of our towns. It is too early to draw definite conclusions, but the indications are that there is a significant reduction in the number of children needing dental attention.

The growing interest in and acceptance of fluoridation by the lay public is, we believe, a result of educational efforts of the dental profession, those engaged in private practice and those in public health. Since the last report, Tarboro and Smithfield have started fluoridating their water supplies; Asheboro and Laurinburg are in the process of installing the equipment; and Washington has approved the measure. In many other communities fluoridation is under consideration. It is gratifying to note the active participation of local dental societies in the promotion of this preventive measure. The Division of Oral Hygiene is glad to co-operate with local groups by providing current information on the subject to professional groups, literature for distribution, and speakers for meetings.

In the area of dental health education, National Children's Dental Health Week provides for emphasis and for concerted efforts in the widespread dissemination of information. The Children's Dental Health Week Committee is to be congratulated on the success of the observance. In co-operation with this endeavor the Division of Oral Hygiene sent material to the dentists of the State, to the local health departments, and to the schools. The material sent to the schools was a special issue of the releases which are sent in connection with the puppet show. This particular issue had to do with a visit to the dentist by Jack's friend, Herbert. Seven thousand copies of this sheet were posted on classroom bulletin

boards, thereby reaching approximately 250,000 children with the suggestion of making an appointment with the dentist.

We are glad to note that another committee concerned with and active in promoting dental health education and information is the Rural Health Committee. The regional conferences and county health fairs sponsored by this committee are effective media for adult health education, and we urge the members of the Society to participate in them.

This council shares responsibilities in the area of dental care, or service, with the committees specifically assigned to such programs. The corrective services referred to above are limited to underprivileged children under thirteen years of age, and are provided for educational and preventive purposes. This committee is concerned with educating and motivating children and adults to assume personal responsibility for their own dental health needs and in promoting preventive measures for the reduction of the incidence of dental disorders.

This report would be incomplete in not recognizing and commending those dentists in private practice who are organizing dental clinics in their respective communities for the purpose of meeting the dental health needs of those who cannot afford to pay for dental services. These dentists are giving their time and services to these people without financial remuneration. This practice is growing throughout the State, the dentists in Pitt County being among the most recent group to provide such service.

This council is cognizant that progress is being made in the direction of a better understanding and co-ordination of the dental health services, both educational and corrective, being rendered by private practitioners and by public health dentists. This is being accomplished through the liaison between the Dental Member of the State Board of Health and the Dental Members of the County Boards of Health. We believe that there are great potentialities in this group of dentists for reaching even greater heights in the appreciation of the many problems confronting us today. It is through their wise counsel and their willingness to contribute their time and talents that better plans and programs can be achieved.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

E. A. PEARSON, JR. (1963), *Chairman*

H. A. KARESH (1962)

E. S. BENSON, JR. (1961)

S. H. ISENHOWER (1960)

R. F. JARRETT (1959)

Action by the House of Delegates: Accepted by title, May 3, 1959.

ENTERTAINMENT OF OUT-OF-STATE VISITORS COMMITTEE

Many conferences have been held with former and past Committee Chairmen, Officers of the N.C.D.S. and co-operating Committee Chairmen in connection with the responsibilities, duties and necessary functions of this Committee. Executive Secretary, A. M. Cunningham, President Everett Moser, Secretary-Treasurer L. H. Butler and members of this Committee have been consulted.

Your Chairman attended the two day mid-winter meeting in Pinehurst, January 10-11. Follow-up letters have been sent President Moser and members of this Committee. Each and every essayist, clinician and guest known to be invited and expected to attend our forthcoming meeting at Pinehurst, May 3-6, has been written to personally, extended a warm, hospitable welcome and assured of our sincere efforts and endeavors to be of service to him and his wife, if she is to accompany him. The other Committee Chairmen will be worked with in closest co-operation to assure a good time, individual recognition and careful and responsive attention to the needs and desires of all visitors and guests.

The Parlor Suite, Rooms 322-323, will be utilized to entertain our visitors and guests. Attention will be given to fruit in the rooms, flowers for ladies at the banquet and to seeing that each is personally cared for by members and their wives for meals, entertainment, sightseeing, etc.

The Hospitality Rooms will be open on Sunday, May 3 from 5:00 p.m.

to 6:30 p.m.; on Monday from 11:45 a.m. to 12:45 p.m., and from 5:00 p.m. to 6:30 p.m.; and from 11:45 a.m. to 12:45 p.m. on Tuesday. There will not be an open house at night nor will there be an open house on Tuesday evening as the Reception and Banquet will be in progress.

An allotment of \$150.00 has been set aside for this Committee's necessary services.

It is hoped ribbons and badges will be worn by all members of the Committee so visitors, guests and members will know of them. It is sincerely hoped and expected that each of the Committee members' wives will ably and faithfully aid, assist and help their husbands in our endeavor to serve hospitably all our guests and visitors this year. The Chairmen of all convention committees have been contacted to avoid overlapping of duties and to do a thoroughly complete job. When members of the N.C.D.S. are invited and urged to help, please try to co-operate as best you can for this important phase of our meeting is the task and responsibility of all. The officers and their wives of the N.C.D.S. are invited, expected and urged to be present to help entertain our guests and visitors at above announced hours and as called upon later.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

WALTER T. McFALL, *Chairman*

R. FRED HUNT

S. L. BOBBITT

HORACE P. REEVES, JR.

CHARLES H. TEAGUE

Action by the House of Delegates: Accepted by title, May 3, 1959.

ETHICS COMMITTEE

The Ethics Committee has filed a written complaint with certain post-graduate clinics expressing the objection of the North Carolina Dental Society to their unethical method of publicizing their clinics. This was done by mandate of the 1958 House of Delegates.

During the year several letters of inquiry concerning ethical practices have been received by your Committee and have been answered to the best of our ability. These letters brought into sharp relief the need for an adjunctive Code of Ethics which would interpret clearly and definitely the broad provisions of the Principles of Ethics of the American Dental Association as it applies to North Carolina dentists.

Last year, in its report to the House of Delegates, the Ethics Committee expressed this need for an adjunctive Code of Ethics and it was toward this end that the Committee directed its main effort this year. The actual study of the project began in January 1958, and has consumed many hours of study since. Your Committee prepared a first draft of a Code of Ethics at its meeting in the Central Office on September 27, 1958. This draft was studied carefully by the District Officers' Conference in Greensboro, December 7, 1958, and suggestions were offered for its further perfection.

On February 22, 1959, the Ethics Committee met at the Central Office and prepared the draft of the Code of Ethics attached to this report.

We have checked with the Chairman of the Constitution and By-Laws Committee and he stated that in his opinion none of these provisions of the proposed Code is in conflict with the ADA Principles and therefore an amendment to the Constitution and By-Laws is not required, if the House of Delegates adopts it.

RECOMMENDATIONS:

That the proposed Code of Ethics be adopted.

G. L. HOOPER (1962), *Chairman*

C. E. MINGES (1961)

H. K. CROTTS (1960)

H. D. FRONEBERGER (1959)

C. C. POINDEXTER (1963)

Action by the House of Delegates: Adopted, May 4, 1959.

On May 5, 1959, the House of Delegates ordered that the revised Code of Ethics be printed and copies be furnished the members and the North Carolina State Board of Dental Examiners for distribution to dentists suc-

cessfully passing the examination of the Board. The cost of printing is to be paid for from the General Fund.

Note: For new Code of Ethics, see Appendix.

EXHIBIT COMMITTEE

1. *Changes in the Floor Plan.*

The floor plan for the exhibit area for the 103rd Annual Session was slightly revised to accommodate 75 booths. Last year 73 spaces were available for rent. However, all spaces this year are priced at \$85.00 each, whereas last year 71 booths were priced at \$85.00 and 2 at \$120.00 each.

This means that the potential revenue from commercial exhibits for 1959 totals \$6,375.00. In 1958 the potential revenue totalled \$6,275.00.

The revision in the floor plan was made on the advice of the Shepard Decorating Company who has handled our decorating needs for many years in the past and will do so again this year.

2. *Sale of Exhibit Space for 1959.*

Over 200 prospective exhibitors were contacted and by March 24 contracts for 63 booths had been received for a total revenue of \$5,355.00.

A full report on the income from sale of exhibit space will be reflected in the auditor's report at the end of the year.

3. *Policy on Admission of Exhibitors.*

Last year an occasion arose which necessitated a statement of policy on the admission of representatives of commercial concerns to the meeting. The Exhibit Committee adopted a policy of admitting only bona fide employees as representatives of exhibitors at the meeting. That policy is being continued this year.

On instructions from the Executive Committee, a contract for space by a commercial concern was refused because of misconduct at previous District and State meetings on the part of the individual representative of that concern.

4. *Committee's Expenses for 1959.*

It is anticipated that the Exhibit Committee's expenses this year will be the same as in 1958, including the decorating of booths, the hotel fee and door prizes. The Executive Committee appropriated \$1,450.00 for the Exhibit Committee in 1959.

5. *Door Prizes.*

As a means of encouraging attendance on the last day of the Annual Session, door prizes will be awarded just before adjournment on Wednesday. For the past several years some 20 door prizes have been awarded. This year a fewer number of prizes will be awarded but each will be of greater value. The total appropriation for this purpose is the same as in 1958, however.

6. *Better Public Relations Needed.*

There is increasing resistance upon the part of commercial companies to exhibit at Pinehurst. There are two reasons for this:

1. For an exhibitor, Pinehurst poses a problem in transportation and hotel accommodations. Pinehurst is not readily accessible for the traveling man unless he travels by automobile. Also, facilities for handling shipments of equipment are limited. Then, hotel accommodations are at a premium. There is not too much we can do about this situation. This year, we did alleviate the hotel accommodations problem somewhat, by having The Carolina secure reservations for exhibitors at other hotels in the village. We received many favorable comments on this service.

2. Quite a few of the companies spoke very frankly and said that their experience at North Carolina meetings had not been good. They said that dentists did not even take the trouble to come by to see them. This is something which we can remedy with a little effort and co-operation on the part of the membership.

First of all, we need to do a little public relations with those representatives while they are in Pinehurst and make them really feel at home. The Exhibit Committee will have a social hour for the exhibitors on Monday afternoon and this will help a great deal. More than that, all

the members of the Exhibit Committee have been asked to make a point of going by every booth at least to shake hands and say "hello."

The Committee will make a determined effort to make all the members conscious of the importance of the commercial exhibitors at our meeting. Announcements urging the members to visit the commercial exhibit area will be made at all the meetings at Pinehurst.

The Committee is confident that with the co-operation of everyone, the objections to Pinehurst on the part of the commercial exhibitors can be overcome. The Committee feels that if the membership is informed of the problem, that each one will do his part to remedy the situation.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

GUY R. WILLIS, *Chairman*

C. Z. CANDLER, JR.

R. PHILIP MELVIN

D. W. SEIFERT, JR.

DAN WRIGHT

Action by the House of Delegates: Accepted by title, May 3, 1959.

EXTENSION COURSE COMMITTEE

Since the Refresher Courses and Post-Graduate Courses at the School of Dentistry, University of North Carolina, offered unusual opportunities for additional study and extension of information, we did not feel that an Extension Course would be practical.

In addition, there have been regional clinics and post-graduate courses, which a large number of our members attended.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

G FRED HALE, *Chairman*

C. D. GERDES

E. M. MEDLIN

GRADY ROSS

R. FRED HUNT

Action by the House of Delegates: Accepted by title, May 3, 1959.

GOLF COMMITTEE

The Golf Committee will sponsor the annual tournament on Sunday, May 3, at Pinehurst. It will be played on a Callaway Handicap basis. Miniature trophies will be awarded to winners of "low net" and "low gross." Twelve other prizes will be awarded.

Special guest of the Golf Committee at Pinehurst this year will be Dave W. Smith, Jr., of Gastonia, noted amateur golfer. He will give a Driving Exhibition at the Pinehurst Country Club Sunday morning and award the trophies to the tournament winners at the Golf Banquet Sunday evening.

An appropriation of \$150.00 has been authorized to cover the cost of the prizes and the expenses of the guest golfer. In keeping with the policy established by the Executive Committee last year, there will be no solicitation of commercial concerns for prizes.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted:

W. K. GRIFFIN, *Chairman*

E. M. MEDLIN

R. L. PAISLEY

JAMES E. GRAHAM, JR.

A. DWIGHT JOHNSON

Action by the House of Delegates: Accepted by title, May 3, 1959.

HOSPITAL DENTAL SERVICE COMMITTEE

Following a request by the Secretary of the Council on Hospital Dental Service of the American Dental Association, the Chairman was privileged to request the services of two members of this Committee.

(a) Dr. Thomas L. Blair accomplished an inspection visit to the Veterans' Administration Hospital, Salisbury, North Carolina, and sub-



Dr. and Mrs. Baxter B. Sapp, Jr., of Durham, just returned from their honeymoon, were the lucky winners of a TV set. Dr. Guy R. Willis, Chairman of the Exhibits Committee presents the happy couple with the top door prize.

mitted a report of his findings to the American Dental Association Council on Hospital Dental Service.

(b) Dr. A. T. Jennette accomplished an inspection visit to the Veterans' Administration Hospital, Fayetteville, North Carolina, and submitted a report of his findings to the American Dental Association Council on Hospital Dental Service.

(c) An additional request by Womack Army Hospital, Fort Bragg, North Carolina, has been submitted to this Committee, but as of this date an inspection tour has not been accomplished.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

MARVIN E. CHAPIN, *Chairman*

P. B. WHITTINGTON, JR.

VAIDEN KENDRICK

GRADY ROSS

THOMAS L. BLAIR

CHARLES M. WESTRICK

H. K. CROTTIS

A. C. RIDDLE, JR.

RALPH L. FALLS

EDWARD U. AUSTIN

F. D. BELL

C. D. COUCH, JR.

A. T. JENNETTE

Action by the House of Delegates: Accepted by title, May 3, 1959.

HOUSING COMMITTEE

Hotel accommodations for the 103rd Annual Session were assigned on the same general basis as in the past two years. The Carolina co-operated in establishing a modified housing bureau which permitted members to indicate their choice of hotels when applying for accommodations for the meeting. Also, the "preferred list" contained the very minimum number of names who were given priority for reservations at the headquarters hotel. After March 15, this priority did not apply.

The rates for The Carolina remained the same as last year—\$15.00 for single rooms and \$26.00 for double rooms.

Hotel application forms were mailed to the membership from Raleigh on Saturday, February 14. Notice to this effect was prominently displayed in the February Newsletter. Hotel applications were submitted to The Carolina in triplicate and The Carolina forwarded the Central Office one copy.

Because of an increase in postal rates, the Housing Committee found it necessary to request a slight increase in its appropriation for this year. The Executive Committee awarded an appropriation of \$75.00 to cover the following:

Envelopes and stationery.....	\$15.00
Mimeo paper and supplies.....	10.00
Postage	50.00
Total	\$75.00

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

W. HOWARD BRANCH, *Chairman*

J. D. SOUTHWORTH
MILO HOFFMAN

ROBERT MCCALL
R. B. BARDEN

Action by the House of Delegates: Accepted by title, May 3, 1959.

INDUSTRIAL COMMISSION COMMITTEE

This year it has not been necessary to call a meeting of the Industrial Commission Committee. A revision of the dental fee schedule pertaining to the North Carolina Workmen's Compensation Act was completed and became effective in 1958.

Last year the House of Delegates recommended that "The Industrial Commission Committee act as a grievance committee for the review of controversial dental cases between a practitioner of dentistry and the Workmen's Compensation Commission."

There have been very few times when any assistance from the grievance committee has been necessary. In every instance, however, the dentist has not followed the dental fee and service schedule properly. It is most important that practitioners prepare a complete itemized statement of services rendered on his own statement or letterhead, attach it to an Industrial Commission form No. 25, sign the form at the place indicated, and forward two copies to the employer or insurance carrier. If these instructions are properly followed it would simplify the clearance of your statement and expedite the return of your check.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

S. B. TOWLER, *Chairman*

VAIDEN B. KENDRICK
J. O. BROUGHTON

DENNIS S. COOK
T. E. SIKES, JR.

Action by the House of Delegates: Accepted by title, May 3, 1959.

INSURANCE COMMITTEE

The Insurance Committee makes its report as a recommendation directed to the membership through the Executive Committee.

Health and Accident: We recommend our North Carolina Dental So-

ciety sponsored policy administered by J. L. Crumpton, Agent, from the Commercial Casualty Company, first; then, if more coverage is desired, we recommend the A.D.A. sponsored plan through M. A. Gesner, Inc., from the National Casualty Company. Effective January 1, 1959, the maximum monthly benefit in this program was increased from \$400.00 to \$500.00 or \$600.00. These two plans now offer slightly over \$1,000.00 coverage. For the information of the members we would like to put the addresses of these agents on record.

Mr. J. L. CRUMPTON
Box 147
Durham, North Carolina

M. A. GESNER, INC.
150 East Superior Street
Chicago 11, Illinois

Liability: Adequate liability coverage is a "must." No one should open his office without it. The Society is prohibited by law from participating in a group plan, therefore, coverage must be obtained from any of several companies who offer such coverage, the Aetna Casualty and Surety Company being one of the best. We recommend complete coverage with all policies issued by the same company so there can be no question as to responsibility. A complete coverage should embrace:

Mal-practice

Owners', Landlords' and Tenants' Liability

General Liability (including personal liability coverage for insured and family)

Hospitalization and Surgery: A Major Hospitalization and Surgery group plan was adopted by all the Districts last year. This is an excellent plan affording good protection for a major catastrophic accident or illness. This plan is available through the Moore & Johnson Agency of Raleigh, which serves the 2nd, 3rd, 4th, and 5th Districts, and through Webb Insurance Agency in Asheville, which serves the 1st District.

Life Insurance: Members of the North Carolina Dental Society are eligible to participate in the A.D.A. Group Life Program underwritten by the Great-West Life Insurance Co., Box 1085, Chicago 90, Illinois. Effective January 1, 1959 the benefits under this program were increased from \$10,000.00 to \$20,000.00.

These four phases offer a very good program with economy afforded by group participation.

During the year two requests have been presented for our consideration. A request has been made that we consider "some type of group health and hospitalization insurance for the employees of the Dentist." This has been under advisement and Mr. Bill Ward of Moore & Johnson Agency has presented a very broad plan to use as a basis for our discussions. These discussions will be completed during our May meeting.

We have been requested again to consider adopting a plan furnishing "overhead business expense" coverage. This type of insurance was discussed at great length last year and we decided against making a recommendation at that time for these reasons:

1. We did not want to "muddy the water" while the drive was in progress for enrollment in our Major Hospital and Surgical plan.

2. This coverage is available on an individual basis for anyone desiring it.

3. Although premiums are deductible, any payment of claims is tax liable.

4. In addition to proof of accident or illness, you also have to furnish proof of office expense loss.

5. The Society has endorsed two group Health and Accident plans plus a Major Hospital and Surgical which afford good coverage. We feel our first allegiance is to get these plans on a good operating and proven basis.

Your committee will fully reconsider this type of coverage when we have the opportunity.

A request came to your committee chairman to meet with and discuss mutual problems with the chairman of the Insurance Committee of the North Carolina Chiropractic Association relating to problems with the Blue Cross and Blue Shield Health Associations. This request was declined as the Legislative Committee has in progress some very promising

efforts to correct this situation and we could not see anyone "hitching on to our coat-tails" at this time.

Your committee would like to endorse the manner in which this committee is presently appointed — one new member each year to serve for five years. This affords a majority of informed members at all times. The understanding that the oldest member is automatically chairman is also a good one. If this understanding has not been spelled out by action of the Executive Committee, then we would suggest that it be done. The nature of this activity makes it necessary that business be extended from one year into the next, thus making it very necessary to have the members and chairman well-informed.

I wish to thank the committee members for their services during the year.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

J. V. DAVIS, JR. (1959) *Chairman*

J. R. EDWARDS (1963)

E. L. EATMAN (1962)

S. P. GAY (1961)

W. J. TURBYFILL (1960)

Action by the House of Delegates: Accepted by title, May 3, 1959.

Supplemental Report of the Insurance Committee

Your Committee on Insurance has been informed by J. L. Crumpton, Durham, North Carolina, that the Commercial Insurance Company, Newark, New Jersey (the company which has insured our members against disability under a Group Plan since 1943) plans within the next 30 to 60 days to offer some important extension of benefits for all eligible members of the North Carolina Dental Society.

These benefits will include lifetime payments for disability due to injury, and up to a possible seven years for sickness, no confinement required in either case.

All present policies may be continued in effect as now written, and no member will suffer any loss in regard to his present guaranteed benefits and rates.

They also plan to offer a new medical reimbursement policy to our members who attain age 70, which they may carry indefinitely even though they retire.

When these new coverages are available Mr. Crumpton will get full information to all eligible members, so each member will know how the coverage applies to him, thus enabling him to decide for himself what best suits his needs.

RECOMMENDATIONS:

From your Committee's understanding of the advantages outlined above, we recommend that Mr. Crumpton's plan in our behalf be approved.

J. V. DAVIS, JR. (1959) *Chairman*

Action by the House of Delegates: Adopted May 5, 1959.

LEGISLATIVE COMMITTEE

The Legislative Committee or Chairman attended the following meetings this past year:

The Chairman of the Legislative Committee met with Mr. Con D. Homberg, representing the North State Health Insurance Council, in Charlotte, July 2, 1958.

On September 7, 1958, the Legislative Committee met at the Central Office in Raleigh and two decisions were made: (1) Contact legal counsel for advice and cost regarding mandate of House of Delegates to amend insurance laws of North Carolina; (2) Approach the members of the North Carolina Dental Society at the district meetings asking for their support should the occasion arise.

The Chairman attended all five district meetings this past fall. He also appeared before the Executive Committee September 28, 1958, in

Charlotte; December 6, 1958, in Greensboro; January 10, 1959, in Pinehurst; and January 17, 1959, in Raleigh.

On November 6, 1958, the Chairman conferred with the Commissioner of Insurance and representatives of Hospital Savings and Hospital Care Associations in Raleigh.

On January 29, 1959, the Legislative Committee met with representatives of both hospital associations, the Commissioner of Insurance and the Executive Committee in Durham.

The above meetings were regarding the mandate from the 1958 House of Delegates of the North Carolina Dental Society to amend Law G. S. 57-1 and repeal Law G. S. 57-3.1. After considerable study and with advice from the ADA Council on Legislation, it was the considered opinion that an attempt be made to handle the problem, at the present time, by negotiations with Blue Cross and Blue Shield Corporations of North Carolina by means of a rider attached to the individual policies. With the decision to take this course of action, the Legislative Committee was relieved of its duties regarding this problem and a new committee was appointed by President Moser to negotiate with Blue Cross and Blue Shield Corporations and the North Carolina Medical Society.

The Chairman of the Legislative Committee of the North Carolina Dental Society met on November 9, 1958, in Raleigh, and on January 10, 1959, in Pinehurst, with the Legislative Committee of the North Carolina Medical Society. These meetings were only informative in nature to the North Carolina Dental Society, explaining what the Medical Society was anticipating in regard to the 1959 North Carolina Legislature.

The Legislative Committee during the past year has co-operated fully with the Legislative Council of the American Dental Association. The Committee recommended to the Association, Liaison Dentists for the Congressmen and Senators who are representing this State in Washington. The Committee has responded to requests from the Council on Legislation by writing the Senators and Congressmen urging their support on legislation beneficial to dentistry.

In the past, the North Carolina Dental Society has been very fortunate in having members of the Society serving in the State Legislature in the capacity of Representatives or Senators. In the 1959 Legislature, the North Carolina Dental Society is not represented in either Assembly of the State Legislature. Since the State Legislature has the power to enact laws in our State that could affect the practice of dentistry, serious thought should be given to the possibilities of retaining legal counsel to represent the North Carolina Dental Society on an annual basis. In this way, the Society would be informed in case any legislation was presented which would affect the practice of dentistry and would have counsel should the necessity arise.

RECOMMENDATIONS:

That the North Carolina Dental Society give serious consideration to the possible employment of legal counsel to represent the Society throughout the year as well as to be the legal counsel during the times the Legislature of North Carolina is in session.

E. U. AUSTIN (1963) *Chairman*

WALTER T. MCFALL (1962)

GUY R. WILLIS (1959)

CLEON W. SANDERS (1960)

PAUL E. JONES (1961)

Action by the House of Delegates: Recommendation adopted May 4, 1959, with the addition of "also the cost of providing this service" following the word "session."

LIBRARY AND HISTORY COMMITTEE AND SUB-COMMITTEE

Your Library and History Committee wishes to report that there has been very little activity on the part of this committee during the year, other than the collection of materials and data to be used in bringing the *History of the North Carolina Dental Society* up to date. The collection of this material is time-consuming and requires much effort.

In the report of last year, it was recommended and passed by the House of Delegates that nothing would be published until such time as

the proper interest in the sale of this publication was shown by the members of the Society. It has not been necessary to call on the Society for any funds since the last report to this body. There was \$600.00 set aside in 1958 for the use of this committee. Since that time only \$20.00 has been used for preliminary work. It appears now that there will be no need for any further appropriations for this committee during the next year.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

NEAL SHEFFIELD (1963) *Chairman*

S. H. STEELMAN (1960)

R. FRED HUNT (1961)

H. ROYSTER CHAMBLEE (1962)

H. W. THOMPSON (1959)

SUB-COMMITTEE:

NEAL SHEFFIELD, *Chairman*

H. C. CARR

Z. L. EDWARDS

CLYDE E. MINGES

C. S. MCCALL

FRANK O. ALFORD

ERNEST A. BRANCH

Action by the House of Delegates: Accepted by title, May 3, 1959.

LIAISON COMMITTEE TO THE MEDICAL SOCIETY OF THE STATE OF NORTH CAROLINA

February 14, 1959, President Moser appointed a Committee to act as a Liaison Committee with the North Carolina State Medical Society to negotiate a rider to be attached to the Blue Cross Policy covering dentistry. This Committee consisted of Doctors Norman F. Ross, Glenn L. Hooper, F. Durant Bell and Edward U. Austin.

The Committee had its first official meeting in Raleigh on February 22, 1959. At this meeting a proposed rider was drafted to submit to the Blue Shield Committee of the State Medical Society for their approval. With the aid of Mr. Cunningham and the personnel of the Central Office copies of this rider were mimeographed. On March 26, 1959, the Chairman of the Committee met with the Blue Shield Committee of the State Medical Society at the Forsyth Country Club, Winston-Salem, North Carolina and copies of the rider were presented to members of the Blue Shield Committee for their study. The proposed rider was received as information by this Committee.

The Blue Shield Committee requested the Liaison Committee to meet with them at their next regular meeting in Asheville, Sunday, May 3, 1959, for possible adoption of the proposed rider. The Liaison Committee plans to be represented at this meeting.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

EDWARD U. AUSTIN, *Chairman*

NORMAN F. ROSS

F. DURANT BELL

GLENN L. HOOPER

Action by the House of Delegates: Accepted by title, May 3, 1959.

SUPPLEMENTAL REPORT OF THE LIAISON COMMITTEE TO THE MEDICAL SOCIETY OF THE STATE OF NORTH CAROLINA

On May 1, 1959, the Committee was represented at a meeting with the Blue Shield Committee of the State Medical Society, at the George Vanderbilt Hotel, Asheville, North Carolina, by the Chairman and Dr. Grady Ross of Charlotte.

Dr. Ross was asked by the Chairman to attend the meeting due to the short notification of the meeting, making it impossible to notify the Committee Members of this meeting. At this meeting the proposed rider, which includes schedules of procedures that were presented at the previously reported meeting in Winston-Salem, North Carolina, was reviewed in detail. Each item was discussed at length in order to reach a

decision as to terminology, procedures and fees that would be acceptable to both Societies.

After discussion, a motion was unanimously passed by the Blue Shield Committee to recommend to the House of Delegates of the North Carolina Medical Society that a Dental Rider be provided with Blue Cross Policies. It was to be suggested that the House of Delegates, through the President, appoint a Committee to work with a Committee from the North Carolina Dental Society to negotiate the final arrangements to be brought back to the governing bodies of the Societies for their approval.

RECOMMENDATIONS:

It is recommended that the House of Delegates of the North Carolina Dental Society empower the Executive Committee of the North Carolina Dental Society to accept the completed rider after it has been worked out with the North Carolina Medical Society if it is satisfactory.

EDWARD U. AUSTIN, *Chairman*

NORMAN F. ROSS

GLENN L. HOOPER

F. DURANT BELL

MEDICARE COMMITTEE

By direction of the 1958 House of Delegates, the President of the North Carolina Dental Society appointed a Committee on Medicare to confer with the military if the occasion arose.

There was only one case that we were called upon to consider and that was with the Air Base at Edenton, North Carolina. The ground work having been already laid last year for the other military installations it was agreed to co-operate with that installation in the same manner as had been done for the others.

This Committee feels that the agreements have been well received on both sides and that while we still do not like the Medicare Act as is written in the law, we have made the best of a bad situation. We would like very much to see the law changed.

Left: Dr. J. O. Thorpe (left) and J. Homer Guion (right) escort fellow Charlottean, Dr. L. Franklin Bumgardner (center) to the rostrum to be installed as the new Vice-President.

Right: Incoming President, W. B. Sherrod installs Dr. S. Byron Towler as Secretary-Treasurer.



RECOMMENDATIONS:

That so long as the Medicare Act is law that the Medicare Committee be continued.

A. T. JENNETTE, *Chairman*
 NORMAN F. ROSS, *Co-Chairman*
 W. B. SHERROD C. W. SANDERS
 HOWARD L. ALLEN

Action by the House of Delegates: Adopted, May 3, 1959.

MEMBERSHIP COMMITTEE

1. Membership as of December 31, 1958:

Dist.	Active	State Life	ADA Life	Recent Grad.	Rec. Grad.		New Member	Total
					Milit. Serv.	Milit. Serv.		
1	181	14	8	5	1	2	(9)	211
2	214	27	8	7	1	2	(12)	259
3	200	26	10	6	2	5	(15)	249
4	128	22	16	4	0	3	(13)	173
5	114	26	9	0	2	4	(6)	155
Total	837	115	51	22	6	16	(55)	1,047

Note: Actually, there were 1,055 members on the roll, but eight (8) members were dropped from the roll as of December 31, 1958 for non-payment of dues.

2. Membership as of April 1, 1959:

Number of members on December 31, 1958.....	1,047
New Members	61
	<hr/> 1,108
Deceased	11
Transferred	2
Resigned	2
	<hr/> 15
Number of members as of April 1, 1959.....	<u>1,093</u>

3. Members who paid dues as of March 31, 1959:

Dist.	Active	State Life	ADA Life	Recent Grad.	Rec. Grad.		Delinquent	Total
					Milit. Serv.	Milit. Serv.		
1	185	13	9	2	2	2	(5)	213
2	223	24	11	3	1	1	(6)	263
3	211	25	12	13	0	4	(6)	265
4	128	20	13	3	0	2	(1)	166
5	124	22	12	6	1	2	(1)	167
Total	871	104	57	27	4	11	(19)	1,074

RECOMMENDATIONS:

The following members did not pay their 1958 dues by December 31, 1958, and according to Article V, Section 6, of the By-Laws they have been dropped from the rolls:

J. M. Anderson (5) New Bern, L. Dale Arthur (2) Charlotte, Clell S. Caldwell (3) Durham, George E. Dennis (4) Raleigh, John T. Gobbel, Jr. (3) Ft. Lauderdale, Florida, F. E. Hendricks (1) Waynesville, Donald McGowan (4) Raleigh, and L. C. Rollins (1) Canton.

The Membership Committee recommends that this action be made a matter of record by this session of the House of Delegates:

W. B. SHERROD, *Chairman*
 A. L. POOVEY J. A. HARRELL
 W. P. HINSON, JR. J. B. POWELL
 W. H. GRAY, JR.

Action by the House of Delegates: Adopted, May 4, 1959.

MILITARY AFFAIRS AND CIVIL DEFENSE COMMITTEE

There has been no request or complaint for this committee to act on pertaining to the Veterans' Administration.

RECOMMENDATIONS:

That every dentist in the state be urged to be aware of his responsibility in the event of an enemy attack or accidents involving radioactive material. Since inter-state shipment of these materials is becoming more commonplace, the possibility of accidents has increased. We should broaden our knowledge of first-aid in treating these cases and should keep in mind the three simple rules set forth by the Governor's Committee on Nuclear Energy.

1. Save any possible lives with minimum contact.
2. Notify local authorities, Chief of Police, Sheriff, Highway Patrol.
3. Detour traffic to prevent spread of contamination. Keep public from scene until the danger is over.

We should always remember that contaminated victims should *not* be taken to hospitals or doctors' offices until danger of contamination of other people has been removed.

J. DONALD KISER, *Chairman*

GUY R. WILLIS

J. M. ZEALY

WORTH M. BYRD

Action by the House of Delegates: Adopted, May 4, 1959.

MONITOR COMMITTEE

To assist the presiding officer to maintain order, the Monitor Committee expects to have four of its members on duty while the convention is in session. Two members will be stationed on each side of the Ballroom entrance. These men will be available to handle the roving microphones in the Ballroom, should the occasion arise.

The Monitor Committee will announce over the amplifying system the beginning of the sessions and who the speakers will be.

The Monitor Committee will use the large posters with the words—"Quiet Please—Convention in Session"—in the two hallways.

The members on duty will wear distinguishing arm bands and their badge with ribbon. They will be available for any duty the presiding officer should request.

There will be a meeting of the Monitor Committee Sunday, May 3, 1959, at 5:00 p.m. in the Ballroom.

The Monitor Committee wishes to make it known that they are willing to do all in their power to assist the Society Officers in making this a successful meeting.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

D. F. HORD, *Chairman*

HOWARD S. RHYNE
A. DWIGHT JOHNSON
R. L. BRIDGES
A. J. GALARDE
H. T. SAIN
T. S. FLEMING
S. H. MASSEY

CAMERON H. KEELS, JR.
LEWIS W. LEE
Z. L. EDWARDS, JR.
JAMES H. LEE
ROY G. BURRUS
ROBERT J. HARNED
J. M. ZEALY

Action by the House of Delegates: Accepted by title, May 3, 1959.

NECROLOGY COMMITTEE

The chairman of the committee was unable to meet with the Convention Committee or the Executive Committee in January at Pinehurst. However, the initial report was given by letter to the Committee and accepted. An appropriation of \$20.00 was granted to the Committee to take care of the expenses of the proposed Necrology Service at the state meeting.

The chairman of the committee has written to the members of the committee requesting that they be responsible for securing the necrology report on each deceased man from their respective districts. A final check will be made prior to the meeting in Pinehurst.

The Necrology Service will involve the lighting of white candles for each memorial and the presentation of each memorial (without reading) on the table. The Chairman will read the names of the memorials and will offer a prayer after the candles are lighted.

As of March 1, 1959, seven of our Society members had passed away. Necrology reports on each of these are nearing completion.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

BOYCE A. BRAWLEY (1963) *Chairman*

W. D. YELTON (1962)

D. T. CARR (1961)

MARCUS R. SMITH (1960)

E. L. EATMAN (1959)

Action by the House of Delegates: Accepted by title, May 3, 1959.

ADVISORY COMMITTEE TO THE NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION

The North Carolina Dental Assistants' Association gives evidence of being an active and dedicated organization, seriously interested in the "Education, Efficiency, Loyalty and Service" of its members, and in becoming a greater asset to the dental profession. They have had no outstanding problems during the year, and report the organization of one new group, the Wayne-Lenoir Dental Assistants' Society. They would appreciate any good word in strategic places by the profession in their behalf.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

D. L. PRIDGEN, *Chairman*

M. E. WOODY, JR.

H. P. REEVES, JR.

M. E. WALKER

GUY PIGFORD

Action by the House of Delegates: Accepted by title, May 3, 1959.

ADVISORY COMMITTEE TO THE NORTH CAROLINA DENTAL HYGIENISTS' ASSOCIATION

As Chairman of the above Committee, it is my pleasure to report that a working relationship of mutual respect and co-operation continues to exist between this group and the North Carolina Dental Society. The Hygienists' Association wishes to express their appreciation for the privilege of meeting with us at Pinehurst again this year and they hope to continue to do so.

Your attention is called to the fact that the Dental Hygienists' Association agreed to try in every way possible to observe and respect the resolutions by the Executive Committee on soliciting of prizes and the hand programs at our annual meeting. They plan to have their own hand programs available. A copy of their tentative program was submitted to the Executive Committee at their recent meeting at Pinehurst. The Dutch Room of The Carolina has been reserved for their meetings on Monday and Tuesday mornings during the hours 8:00 a.m.-1:00 p.m.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

A. DWIGHT PRICE, *Chairman*

H. D. FRONEBERGER

H. O. LINEBERGER, JR.

HORACE K. THOMPSON

RILEY E. SPOON, JR.

Action by the House of Delegates: Accepted by title, May 3, 1959.

NORTH CAROLINA DENTAL SERVICE CORPORATION COMMITTEE

After careful consideration of group dental health care plans of California, Texas and other states, and the history and background of the

movement as outlined in "Group Dental Health Care Programs" published by the ADA, the committee agreed that further study and guidance would be needed before any specific recommendations could be made for the establishment of such a plan in North Carolina.

While the committee concurs with the 1957 House of Delegates that definite plans should be carefully formulated should a demand for such a program arise, the committee unanimously agreed that the actual establishment of such a program should not be accomplished until there is a definite need for it. The committee concluded that in the preparation of such a plan legal counsel would have to be employed:

(1) To determine if a group dental health care program can be set up under existing state statutes.

(2) To seek the passage of enabling statutes by the next legislature to permit the establishment of a group dental health care program if necessary.

(3) To draw up articles of incorporation for such a program.

RECOMMENDATIONS:

1. That a special committee for the purpose of developing a dental service corporation again be appointed for next year.

2. That the budget next year include an appropriation to enable this committee to employ the necessary legal counsel.

C. D. EATMAN, *Chairman*

J. E. MOSER

G. W. YOKEYLEY

M. L. CHERRY

J. M. PRINGLE

C. B. JOHNSON (New Bern)

Action by the House of Delegates: Adopted, May 4, 1959.

LIAISON COMMITTEE TO THE OLD NORTH STATE DENTAL SOCIETY

On February 7, 1959, R. A. Hawkins, D.D.S., Charlotte, filed a complaint before the North Carolina Advisory Committee of the Civil Rights Commission meeting at Charlotte.

The complaint stipulated that it was filed as an individual and not as a representative of any organization, and stated that he was being deprived of his rights in not being permitted to become a member of the North Carolina Dental Society.

The local committee took no action themselves but forwarded it to Washington to the Civil Rights Commission.

The Second District Society records show that Dr. Hawkins wrote twice with reference to becoming a member. Application blanks were forwarded to him with an explanation of the procedures to be followed in electing new members. The blanks were never returned to the Secretary.

After conferring with Dr. Moser, it was decided that no positive action should be taken, but records assembled in case the National Civil Rights Commission called for a hearing.

Assembled together in one file are:

Complaint from Dr. Hawkins, which contains copies of his letters to the Second District Secretary and to Dr. H. K. Thompson.

Copies of the letters sent in reply by Dr. Reece.

Letters from Dr. Reece explaining the action taken by the Second District Dental Society.

This report may need to be expanded in the light of possible changes in the situation.

RECOMMENDATIONS:

District Secretaries should be requested to forward copies of all correspondence, received and sent, plus any other pertinent information on matters of inter-racial relationships to the State Secretary so all this material can be assembled at one place and readily available.

BURKE W. FOX, *Chairman*

WILLIAM L. WOODY

C. E. ABERNETHY

H. V. MURRAY

R. L. WHITEHURST

Action by the House of Delegates: Adopted, May 4, 1959.

COMMITTEE ON PRESIDENT'S ADDRESS

We feel that each President from year to year gives us a summation of much thought, study and experience in his President's Address. Dr. Everett Moser has continued that tradition in a most exceptional manner. He is to be congratulated for the business-like conception of these things which have transpired during his administration and the needs and possibilities of the future. The Committee feels that the conclusions which he has reached and the recommendations which he has made have not come about without much thought, study and reflection.

Dr. Moser makes four recommendations in his address and the Committee sees fit to report on these as follows:

RECOMMENDATIONS:

1. *Concerning location and purchase of real estate.* While the Committee is most heartily in accord with the idea that some time in the future it would be desirable to purchase a suitable lot and construct a Central Office Building, we feel that the current provision to deduct 5 per cent of income from dues each year for this purpose is adequate for the present time.

In addition, the Committee does not deem it advisable to recommend that any part of reserve in General Fund be borrowed for this purpose and most certainly no part of the Relief Fund be used at any time for such a purpose, as we consider this fund separate and apart from the actual operating assets of the North Carolina Dental Society.

2. *Raise in dues.* Inasmuch as the North Carolina Dental Society is currently operating in the clear with the present income and since the American Dental Association dues will be raised an additional \$10.00 beginning in 1960, the Committee suggests that this recommendation be received as information and no action be taken.

3. *Fluoridation.* Dr. Moser's recommendation on fluoridation as a public health measure is most heartily approved and the Committee stresses that every effort be continued to extend this service to as many cities and communities as possible. We concur in this recommendation.

4. *Authorizing Standing Committee.* The Committee recommends that instead of a standing committee of ten men being authorized by the House of Delegates for the specific purpose outlined, that the present Dental Advisory Committee to University of North Carolina be designated and authorized by the House of Delegates to assume the duties as mentioned when needed. This action will obviate the appointment of an additional standing committee and designate more authority to the Advisory Committee.

C. W. SANDERS, *Chairman*

D. L. PRIDGEN

A. C. CURRENT

Action by the House of Delegates: Recommendations 3 and 4 adopted. Recommendation 1 changed to read:

"Since the American Dental Association recommends that a fund equal to a full year's operational expense should be held in reserve at all times, and since the Society at present has in reserve, in the General Fund, only about one third (or \$8,000) of this amount, your Committee feels that it would be unwise to borrow or use any portion of this fund except for emergency purposes.

Concerning Relief Fund—as stated in our original report "most certainly no part of the Relief Fund should be used at any time for such a purpose, as we consider this fund separate and apart from the actual operating assets of the North Carolina Dental Society."

Recommendation 2 changed to read:

"When the original report on the President's Address was made, available financial reports of the North Carolina Dental Society indicated that the organization was operating within present income. Subsequently it has been brought to our attention that additional expenditures may be necessary during the coming fiscal year, of which we were not aware. Your Committee therefore, wishes to recommend that the House of Delegates, being supplied with such information, use its own discretion as

to the advisability of raising the annual dues to the extent that may be necessary to meet such additional expenses of the North Carolina Dental Society."

Recommendations 1 and 2 were adopted as amended. Recommendation 2 was referred to the Executive Committee for further study.
May 6, 1959

PROGRAM COMMITTEE

The Scientific Program for the North Carolina Dental Society has been arranged, and we feel will offer a very full and balanced program. We have secured three major essayists:

- Dr. Leroy Peterson of St. Louis—
"Basic Principles and Techniques in Oral Surgery"
- "Surgical Management of Benign Cysts and Tumors"
- Dr. Stanley Harris of Chicago—
"The Use and Abuse of Drugs in Dentistry"
- Dr. Meigs Jones of Kansas City—
"Better Dentistry Faster"

These men are tested clinicians and should be well received.

We plan two innovations for this meeting. A twenty to thirty minute film is scheduled to precede each essayist. These films will be presented in the main Ballroom. They should help keep the meeting on schedule by having the audience in their seats for the introduction of the speaker. They will also broaden the scope of the meeting. The subject matter of the films will be included in the report of the sub-committee on visual aids.

Another new feature will be the "Projected Clinics." These presentations will give us an opportunity to hear men of ability from our own Society. One hour is set aside in the main Ballroom for four fifteen minute presentations. The lineup includes:

- Dr. Clarence Sockwell, UNC—
"High Speed"
- Dr. J. B. Freedland, Charlotte—
"Retrograde Root Canal Fillings in Calcified or Obstructed Canals"
- Dr. Robert H. Sager, UNC—
"Proliferative Oral Lesions"
- Dr. Norman F. Ross, Durham—
"Crown and Bridge Procedures"

A moderator whose duty it is to introduce the speaker and conduct the question and answer period at the end of the essay has been selected for each essayist and the projected clinics.

RECOMMENDATIONS:

1. That the President-Elect appoint his Program Committee early since many state meetings occur at the same time as ours, and there is competition for clinicians.

2. Since so many allied meetings are held in conjunction with our meeting, we recommend that they be scheduled so as not to encroach upon the meeting time of the North Carolina Dental Society, and that we continue a heavy emphasis on the scientific aspect of our program.

THOMAS G. NISBET, *Chairman*

S. H. ISENHOWER
B. B. SAPP, JR.

W. S. PEERY
C. W. SANDERS

R. B. BARDEN

Action by the House of Delegates: Adopted, May 5, 1959.

PROSTHETIC DENTAL SERVICE COMMITTEE

We commend previous action by this committee for the calm and undisturbing manner in which a very perplexing problem has been handled. In some of our fellow organizations this issue has been forced into the open where public opinion has caused a hasty decision which was disadvantageous to all parties concerned.

RECOMMENDATIONS:

The Committee recommends that the Society:

1. Emphasize again to all dentists the necessity for clearly written, specific instructions to their laboratories about any prosthetic service.
2. Promote any activity by the North Carolina Laboratory Association which will enable them to get a clearer, more representative voice from the laboratories.
3. Continue a strong personal contact between North Carolina dentists and their patients as to the purposefulness of the present situation in North Carolina.
4. Encourage all laboratories in the state to maintain ethical standards.
5. Establish an accreditation program which would not be a burden to North Carolina dentists or the laboratories concerned, but would promote understanding of the patients' needs and desires.

COLIN P. OSBORNE, JR. (1963), *Chairman*

W. B. SHERROD (1962) C. D. EATMAN (1960)

J. B. NEWMAN (1961) H. S. PLASTER (1959)

Action by the House of Delegates: Recommendations 1, 3, and 4 were adopted.

Recommendation 2 was amended to read: "Assist the North Carolina Laboratory Association in obtaining a more representative voice from the laboratories of North Carolina."

Recommendation 5 was deleted.

May 5, 1959

PUBLICITY COMMITTEE

The Publicity Committee co-operated fully with the Program Committee in publicizing the 103rd Annual Session in the Newsletter, the JOURNAL and in the newspaper press.

Announcement of the featured essayists was made in the October Newsletter. A full page advertisement of the 103rd Annual Session was carried on the back cover of the January JOURNAL and a story on the meeting appeared in the General News section of that same issue. The Publicity Committee is grateful to the Editor-Publisher for this fine publicity. A preliminary program appeared in the February Newsletter and the April JOURNAL carried a complete program of the 103rd Annual Session.

The Publicity Committee again secured the services of Mr. A. C. Snow of Raleigh to prepare pre-convention releases for newspapers, beginning about four weeks in advance of the May meeting. He will also be with us at Pinehurst to cover the day-by-day activities of the Annual Session via the wire services of the Associated Press and the United Press International and to assist in the photographic coverage of the meeting.

Mr. Snow is a very capable newspaperman and is on the staff of the *Raleigh Times*. He has performed these same services for us in a commendable manner for the past two years. Last year he was personally commended by the Associated Press office in Charlotte for his coverage of our 1958 meeting. The stories he filed on that meeting were acclaimed the best coverage of any convention received by the AP office in Charlotte. The Committee feels fortunate in once again securing Mr. Snow to handle the press releases for the meeting.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

Z. L. EDWARDS, JR. (1963), *Chairman*

C. W. SANDERS (1962) CLYDE JARRETT, JR. (1961)

RALPH L. FALLS (1960) W. K. GRIFFIN (1959)

Action by the House of Delegates: Accepted by title, May 3, 1959.

RELIEF COMMITTEE

From May until November of 1958 there were three receiving relief from our Relief Fund. From November until the filing of this report there have been two receiving aid from the Relief Fund, each receiving



Left: Mrs. Walter E. Clark, President of the Auxiliary, presents NCDS President S. Everett Moser with a check for the Relief Fund, while Vice-President Charles H. Teague beams broadly. The Scrap Amalgam Drive by the Auxiliary netted a record-breaking \$2,542.94.

Right: Mrs. H. E. Butler, Mrs. C. E. Abernethy and Mrs. J. W. Whitehead at the Auxiliary registration desk.

\$105.00 per month, \$52.50 being paid out of the State Relief Fund and \$52.50 paid by the ADA Relief Fund.

One member of the dental profession, but not a member of the State or ADA, received aid from the Relief Fund for a six months' period. However, his grant was not renewed by the component society in which he resides.

There are now two recipients of aid from the Relief Fund. One is a member of the North Carolina Dental Society and one is the widow of a deceased member. If the two now receiving aid should receive aid the rest of the year, the Relief Fund will have spent \$1,575.00 for this cause.

No report on the Relief Fund would be complete without mentioning the fine service that the Dental Auxiliary is rendering to this good cause in the collecting of scrap amalgam. Last year the total received from the sale of scrap amalgam amounted to a grand total of \$1,787.28, bringing the total for the five years that the Auxiliary has had this as their major project to \$7,897.22.

This committee is glad to announce that we have not received a request for aid so far this year.

At the District Officers' Conference in Greensboro, December 6-7, 1958, the Chairman of this Committee spoke to the group on matters pertaining to the Relief Fund. The Conference agreed on a standard procedure for processing applications for relief grants. Basically the plan calls for all applications to originate with the Relief Committee of the District concerned. Copies of this procedure may be obtained from the Central Office and should be followed to the letter by those seeking relief grants.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

J. T. LASLEY (1963) *Chairman*

EVERETT L. SMITH (1960)

J. HOMER GUION (1959)

WALTER E. CLARK (1961)

R. FRED HUNT (1962)

Action by the House of Delegates: Accepted by title, May 3, 1959.

RESOLUTIONS COMMITTEE

The following resolution is presented to the House of Delegates for consideration:

Resolved, that the House of Delegates of the North Carolina Dental Society hereby instructs the Legislative Committee to prepare, with such legal assistance as they deem necessary, a revision of Article 2 of Chapter 90 of the General Statutes of North Carolina as amended by the 1957 Legislative enactments.

The change suggested refers to the second paragraph of Article 2, Section 1, G.S. 90-22. This paragraph stipulates that the Governor must commission men to the North Carolina State Board of Dental Examiners who are members of the North Carolina Dental Society and who have been elected to the office by the said Society.

It is suggested that the words "member of the North Carolina Dental Society" be replaced by a suitable phrase such as "a dentist regularly licensed in the State of North Carolina and of recognized standing in the profession."

Reference to election of men for these posts by the North Carolina Dental Society or its Executive Committee should be eliminated.

The Legislative Committee should attempt to secure this change in the law by the General Assembly of North Carolina as soon as practicable.

Steps should also be taken to make any necessary changes in the laws of the North Carolina Dental Society which refer to the election of members of the Board of Dental Examiners, making the election refer to two (or more) *nominees* to be recommended to the Governor for his consideration in making the appointments.

RALPH D. COFFEY, *Chairman*

FRANK G. ATWATER
PAUL E. JONES

WALTER H. FINCH
CARL A. BARKLEY

Action by the House of Delegates: Rejected May 6, 1959, and referred to the North Carolina State Board of Dental Examiners for further study.

RURAL HEALTH AFFAIRS COMMITTEE

The Rural Health Affairs Committee has been busy this year presenting dentistry and the dental profession to the rural areas and meeting with the various agencies throughout the state. All of the district meetings of the Medical Society's Rural Health Committee have been attended by members of the dental profession, and in most cases, by a member of this committee. In some cases, such as in the Greenville meeting, Dr. M. B. Massey and his associates in Greenville and nearby towns represented dentistry.

The Haywood County Fair, which was in fact a health fair, was an outstanding meeting and was attended by several dentists. Dr. E. A. Pearson, Jr., Director of the Division of Oral Hygiene, was in attendance and reported a most interesting and informative phase of dentistry presented to the people through illustrations, clinics and examples.

Our report this year can best be expressed by quoting from a report of Dr. Walter T. McFall of Asheville, which is an example of what the Rural Health Affairs Committee is trying to do in North Carolina. . . . "In Western North Carolina, our population is largely rural in nature. Believing we have 'men to match our mountains' and a closeness to God and one's fellowman not found so abundantly elsewhere, our public relations and dental health education endeavors and achievements are geared to services on a local level. We have more than eight Study Clubs in our First District Dental Society. Nearly all our dentists are leaders in their cities, towns, and counties, and are on committees of importance and service to our people. We have several dentists on City and County Boards of Health; many serve on major civic, health and welfare committees and commissions. All serve the public well. Since the President of the North Carolina Medical Society's Rural Health Program as well as the President of the North Carolina Medical Society this past year were both Western North Carolina physicians, on each and all our local

and district medical and dental society programs special attention was given during the year to work of rural health. During National Children's Dental Health Week celebrations, during Cancer prevention and Inspection Programs, during Science and Health Fairs, during the 4-H and Future Farmers of America programs, dentistry and dental health were featured. At the meetings of our Farmers' Federation, programs were given, literature distributed, well-baby clinics held and M. & I. programs presented with physicians, nurses, and dentists all participating. The Cleft Palate and Hair-Lip Clinics proved helpful and Dr. Koepp Baker in our section has an international reputation for promoting, developing, and sponsoring closely allied relationships between medicine, dentistry, speech therapy, social work, etc. This is an important service to our people. Intimate and closely correlated efforts have been integrated in city, county, and state health efforts for dentistry. Several clinics, inspection groups, fluoridation education and programs installed. Even in Mental Health's theme the importance of dentistry was stressed and the story of the marvelous research that dentists are doing in this field was told. In our city, county and district hospital programs, dentists are on staffs and take their part in places of leadership. Many new and younger dentists have come to our Western North Carolina section this past year to balance our greatly needed dentist-population ratio."

We think the relationship between the professions of dentistry and medicine has greatly improved and has been enhanced by meeting together and attempting to show the need for dental services throughout the state, and also presenting dentistry wherever possible.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

L. M. MASSEY, <i>Chairman</i>	
WALTER T. MCFALL	FRANK W. KIRK
NEAL SHEFFIELD	D. L. PRIDGEN
DARDEN J. EURE	

Action by the House of Delegates: Accepted by title, May 3, 1959.

ADVISORY COMMITTEE TO THE SCHOOL HEALTH CO-ORDINATING SERVICE

At its initial meeting on Saturday, July 26, 1958, at the Central Office in Raleigh, the Advisory Committee to the School Health Co-ordinating Service reviewed the history and background of the School Health Co-ordinating Program. The Executive Committee was invited to the meeting and the majority of the members attended. Also, at the invitation of this Committee, Dr. Freeman C. Slaughter, representing the North Carolina Unit of the American Society of Dentistry for Children, was also present.

The Committee met again on October 16, 1958, at the Central Office in Raleigh and prepared a statement of *Policy for Handling Indigent Cases on a Local Level*. A copy is attached to this report. In addition, a Fee Schedule was prepared and was transmitted to the Executive Committee for its approval. This Schedule was returned to the Committee for further changes and adjustments.

Subsequently, changes in this Proposed Fee Schedule were effected by correspondence with members of this Committee and a revised Fee Schedule was transmitted to the Executive Committee. A copy of this Fee Schedule is also attached to this report. Subsequent action on this Fee Schedule by the Executive Committee will be included in a supplemental report to the House of Delegates.

On January 18, 1959, the State Board of Health scheduled a meeting in Raleigh devoted to the consideration of all aspects of the School Health Co-ordinating Program. Members of this Committee, as well as members of the Advisory Committee of the Medical Society, were invited to attend. Representing the Dental Society at the meeting were all the members of this Committee with but one exception and four members of the Executive Committee.

Dr. Z. L. Edwards, dental member of the State Board of Health, gave a detailed summary of the establishment and the development of the School Health Co-ordinating Program. It was decided that a Committee composed of representatives of the Medical and Dental Societies should approach Mr. Paul A. Johnston, Director of Administration, with the recommendation that the School Health Co-ordinating Program be administered solely by the State Board of Health rather than jointly by the State Board of Health and the State Board of Education. Dr. Paul E. Jones and Dr. Z. L. Edwards are to represent the Dental Society on this Committee.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

S. B. TOWLER, *Chairman*

DENNIS COOK

THOMAS L. BLAIR

D. W. SEIFERT, JR.

GEORGE F. KIRKLAND, JR.

H. ROYSTER CHAMBLEE

PAUL E. JONES

DONALD L. HENSON

Action by the House of Delegates: Accepted by title, May 3, 1959

**Recommended Policy for Handling Indigent Cases on a Local Level
School Health Co-ordinating Service**

1. Early in the school year the members of the Dental Society who are willing to participate in the program meet with the superintendent of schools and the local health director to determine budget (amount tentatively allocated for dental services) and when the program will begin.

2. Those dentists participating in the program will give the days and hours they will set aside for this work.

3. The principal of each school will be notified of this schedule. They, in turn, will be responsible for getting a certain number of children to the specified dentist's office and for returning the children either to school or home.

4. Each school principal will know where he is to take the children from his school.

5. Certification of these children by the welfare department will be the responsibility of the principal and the health director.

6. After the school superintendent and local health director have presented the budget (amount for dental services), then, based upon past experience as to the number needing the service, a ceiling will be fixed, agreeable with the local dentists as to amount to be expended for any one child during the year.

7. If there arises a situation where an individual case requires a greater expenditure than allowed by agreement, then the local dentist treating the case, the local health director, and the superintendent of schools will be called into consultation to determine what amount can be reasonably spent for such case. In situations of this type the case can be handled on a local level where all parties can familiarize themselves with the case, without having a review board on a state level to make such decisions. It is a local matter, thus the people in the local area should make these decisions. This will allow for faster work and greater harmony among all participants.

**Proposed State-Wide Uniform Schedule of Dental Fees
School Health Co-ordinating Service**

1. Prophylaxis	\$ 3.00
2. Fillings	
a. Amalgam (fee includes base)	
One surface (maximum, two per tooth)	2.50
Two surface	4.50
Three or more surfaces	6.50
b. Cement	3.00
c. Silicate cement	3.00

3. Extractions	
a. Each extraction	\$ 2.50
b. Impacted teeth	10.00-20.00
(accompanied by X-Ray film showing impaction)	
c. General Anesthetic	5.00
4. X-Rays	
a. Intra-oral:	
First film	3.00
Each additional film (to 8 films)	1.00
Whole mouth	12.00
b. Extra-oral	7.50
(to be authorized in accident cases only)	
5. Crowns	
Stainless steel or band amalgam	9.00
6. Dentures	
a. Full upper or lower, acrylic	60.00
b. Partial upper or lower, without clasp, any number of teeth	35.00
c. Acrylic appliance for correcting anterior teeth in	
linguo-version	35.00
d. Repairs:	
Acrylic, simple	8.00
Each tooth replaced in addition	2.00
7. Fractures	
a. Reduction of simple fracture, not requiring any wires	
or splints	20.00
b. Reduction of fractures requiring open reduction,	
extensive wiring, splints or head-cap	125.00
8. Root Canal Therapy	
Extirpation of pulp and filling of one root canal, anterior	25.00

SCIENCE FAIR COMMITTEE

The Science Fair Committee is a new committee appointed for the first time in North Carolina by our President in May of 1958. Subsequent to this appointment the Chairman endeavored to find informational bulletins pertaining to the functions of this committee. It was not until late fall that any information was obtained from the ADA in regard to the proposed plans of co-operation by the dentist and dental societies with the National Science Fair project.

Since that time the activities of the committee have been limited primarily to that of the Chairman. The Chairman has corresponded with state officials in regard to the North Carolina Unit of the Science Fair project and has found that the unit in North Carolina works primarily through the State Fair and therefore is interested in funds for the administration of the State Fair exhibits.

A letter was sent to all members of the Science Fair Committee on January 26, however only two members responded in regard to the proposed request for funds for the State Unit.

It was the current recommendation of this committee, from the limited opinion of the members, that the North Carolina Dental Society should not contribute any funds to this project for the current year, however it should be considered as a possibility for the year 1959-1960. It seems that the main potential for the Dental Society in co-operating with the Science Fair project lies in a local interest and not on the state level. By this it is meant that the direct dentist to Junior High and High School patient relationship is the place where such stimulation on dental projects and dental materials can meet with the greatest success.

Quite a bit of information in regard to the projects in North Carolina and elsewhere has been obtained by the Chairman and will be available for the Chairman of the committee in the year 1959-1960.

Inasmuch as this is a new committee which has had limited functions during the past year it is not deemed reliable to make specific recommendations for the next year.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

W. M. DITTO, *Chairman*

ALLEN T. LOCKWOOD
J. R. WHELESS

HAROLD W. THOMPSON
J. E. SWINDELL

A. L. WOOTEN

Action by the House of Delegates: Accepted by title, May 3, 1959.

SKEET SHOOT COMMITTEE

The skeet tournament will be held on Sunday, May 3, 1959, at 1:30 p.m. at the Pinehurst Gun Club. Two prizes will be awarded at the Golf Award Banquet on Sunday night, May 3, 1959.

In order to stimulate interest, the skeet committee requests some space for publicity in the North Carolina Dental Society Newsletter for March, April, and May.

In addition, the committee requests some more mimeographed material on skeet shooting to be on hand to be passed out to the dentists as they register at Pinehurst.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

A. C. CURRENT, JR., *Chairman*

MARVIN E. CHAPIN

JOHN T. BELL

Action by the House of Delegates: Accepted by title, May 3, 1959,

STATE INSTITUTIONS COMMITTEE

The State Institutions Committee has contacted all the state institutions in regard to their dental staff and for any comments the heads of the departments would like to make.

The State Hospital, Raleigh, has two full-time dentists and two dental assistants and is using externs from the University of North Carolina during the summer months. Equipment is adequate and the staff is endeavoring to see all patients about twice a year.

The State Hospital, Butner, has two full-time dentists and two dental assistants. Equipment is adequate and the program is running smoothly.

The State Hospital, Morganton, has two full-time dentists on the hospital staff and also a consulting dentist on a part-time basis. No other comments.

The Caswell Training School, Kinston, has one full-time dentist employed. No other comments.

The State Hospital, Goldsboro, has been allotted two full-time dentists, but one position has been vacant for some time. No other comments.

The State Prison, Raleigh, has recently acquired one full-time dentist, Dr. Roy Keith.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

EDGAR D. BAKER (1963), *Chairman*

M. M. LILLEY (1962)

M. H. TRULUCK (1961)

B. B. SAPP, JR. (1960)

R. E. MASTEN (1959)

Action by the House of Delegates: Accepted by title, May 3, 1959, and instructed the Executive Committee to seek permission to have a representative committee from the Dental Society visit the various state institutions for the purpose of viewing, studying and evaluating the dental services rendered and the physical equipment in these institutions, and to offer aid and consultation to the various departments to aid them in continuing high quality service. A report from this committee is to be brought back to the House of Delegates.

STATE-WIDE STUDY CLUB COMMITTEE

It is the opinion of this committee that Study Clubs can be most effective if organized and operated on a local level.

The State-Wide Study Club Committee has communicated with the Presidents of each of the five districts of the North Carolina Dental Society asking their co-operation in facilitating the formation of Study Clubs by appointing committee for this purpose. The State-Wide Study Club Committee offered its services to such appointed committees.

A response was received from two of the five District Presidents. As of this writing, there is no information indicating any appointments of District Study Club Committees.

This committee feels that the formation of Study Clubs is one of the most constructive and effective ways for dentists to exchange ideas, problems, and also provide a stimulus for maintaining a high level interest in the progress of dental science.

Inasmuch as Study Clubs are most effective on a local level, a State-Wide Study Club Committee can make its best contribution by encouraging the formation of such groups and aiding such formations in an advisory capacity.

RECOMMENDATIONS:

That each district be encouraged to set up a Study Club Committee with the hope that such committees can be assisted by the advice and guidance of the State-Wide Study Club Committee. Such advice and guidance would be (1) Organizational planning, (2) Rules and regulations (3) Subject matter for study club groups, (4) Listing of visiting speakers, (5) Outline of special projects of specific interest.

J. B. FREEDLAND, *Chairman*

DENNIS S. COOK

H. ROYSTER CHAMBLEE

Action by the House of Delegates: Adopted, May 5, 1959.

SUPERINTENDENT OF CLINICS COMMITTEE

This Committee will do its best to co-operate with the Clinics Committee. We will see that all table clinicians have a suitable place to show their clinics and that they are properly marked and convenient for members of the Society to view.

RECOMMENDATIONS:

This report is informational in nature and no recommendations are submitted.

M. M. FORBES, *Chairman*

PEARCE ROBERTS, JR.

GLENN BITLER

J. B. FREEDLAND

GEORGE L. EDWARDS, JR.

J. W. MENIUS

Action by the House of Delegates: Accepted by title, May 3, 1959,

DENTAL ADVISORY COMMITTEE TO UNIVERSITY OF NORTH CAROLINA

The Advisory Council to the UNC School of Dentistry met with Dr. John C. Brauer in Chapel Hill, December 3, 1958. The following items were discussed in detail:

1. Expanding facilities at Chapel Hill for training dentists and auxiliary personnel is most essential.

2. Supporting legislation favorable to dentistry is a challenge to every dentist.

3. Lending our wholehearted support to the expansion of dental research is vital to our existence as a scientific profession.

4. Having the boys and girls of our State adequately informed about dentistry and its allied fields as a career is a must if we are to go forward.

As a result of these discussions, the Advisory Council wishes to make the following recommendations:

RECOMMENDATIONS:

1. That the North Carolina Dental Society urge all local Societies within the State to lend their support to the officials of junior and

senior high schools in an effort to inform the pupils about dentistry and allied fields as a career.

2. That information be furnished the schools as follows:
 - a. By providing ADA approved pamphlets on the subject.
 - b. By offering qualified speakers to appear before groups of students.

A. C. CURRENT, *Chairman*

PEARCE ROBERTS, JR.

Z. L. EDWARDS

RILEY E. SPOON, JR.

L. G. PAGE

COYTE R. MINGES

RALPH F. JARRETT

A. P. CLINE

DANIEL T. CARR

C. W. POINDEXTER

W. HOWARD BRANCH

Action by the House of Delegates: Adopted, May 5, 1959.

ADVISORY COMMITTEE FOR VETERANS' ADMINISTRATION PROGRAM

The attached Revised Schedule of Dental Fees for the State of North Carolina has been approved by the Veterans' Administration in Washington. Subject to approval by the House of Delegates, it will become effective July 1, 1959.

The Committee wishes to express thanks to Dr. W. P. Weeks, Chief, Dental Service, Veterans' Administration, Winston-Salem, for his co-operation in securing this revised schedule for the dentists in North Carolina.

RECOMMENDATIONS:

That the attached schedule of dental fees for the Veterans' Administration be approved by the House of Delegates and that the schedule be made effective July 1, 1959.

BERNARD N. WALKER (1962), *Chairman*

H. E. PLASTER (1961)

C. H. TEAGUE (1960)

GUY E. PIGFORD (1959)

L. D. HERRING (1963)

Action by the House of Delegates: Adopted, May 5, 1959.

Revised Schedule of Fees—Dental State of North Carolina (Effective July 1, 1959)

The fees listed in this schedule are the maximum fees for these services. Participating Dentists may not make claim for payment of fees in excess of those charged the general public in their localities for similar services. If there is need for services not listed recommendations will be submitted to the Chief, Dental Service, VA Regional Office. This fee schedule is effective July 1, 1959 and all cases authorized prior to this date will be paid in accordance with fees in effect at the time of the authorization. Cases must be completed at the authorized fee and cannot be returned for reauthorization on this fee schedule.

1. Examination and Execution of VA-Form 10-2570C
(See Note 1).....\$ 4.00
2. Radiographs:
 - Singles—
 - First Film 2.00
 - Each additional 1.00
 - Maximum Fee 10.00
 - Full Mouth X-rays (Minimum 14 Films)..... 13.00
 - Intra-Oral, Occlusal View, Maxillary or Mandibular, Each.... 5.00
 - Mandible (Extra Oral)..... 7.50
 - Maxilla and Facial Bones (Extra Oral)..... 10.00
3. Professional Visits to Bedside (See Note 2)..... 6.00
4. Special Consultation Fee, Necessity to be Shown..... 10.00
5. Prophylaxis Treatment (To include scaling and polishing
of teeth) 5.00
6. Pyorrhea Treatment 6.00
7. Microscopic Examination for Vincent's Infection..... 5.00

8. Vincent's Infection:	
First Treatment (See Note 3).....	\$ 6.00
Subsequent Treatment, Limited to Four, Each Treatment.....	5.00
9. Emergency Treatment, Palliative.....	3.00
10. Extractions: (See Note 4)	
Single with Local Anesthesia.....	5.00
Each Subsequent Tooth.....	3.00
Impacted Teeth (See Note 5).....	10.00-40.00
11. Post Operative Treatment Not Covered by Flat Fee, on Supplemental Authorization with Necessity Shown.....	3.00
12. Anesthetics:	
General	10.00
13. Fractures: Maxilla, Mandible	
Simple, Compound, and/or Comminuted	
NOTE:	
To be authorized by the Chief, Dental Service under a special fee according to the location, severity, and complications of the fracture. The fee approved will not be in excess of the fee usually charged the general public for similar services in the locality where the service is to be rendered.	
14. Dislocation:	
Maxilla, Inferior	15.00
15. Extirpation of Pulp, Treatment, Filling of Root Canal	
Radiograph (See Note 6) for Single Rooted Tooth.....	35.00
16. Amalgam Fillings: (See Note 8)	
Cavities Involving One-Tooth Surface.....	4.00
Cavities Involving Two-Tooth Surfaces.....	7.00
Cavities Involving Three or More Tooth Surfaces.....	10.00
17. Gold Fillings or Inlays:	
One-Surface Cavities	15.00
Two-Surface Cavities	20.00
Three Surface Cavities.....	25.00
18. Silicate Cement Filling.....	5.00
18a. Acrylic Filling	5.00
19. Crowns:	
Acrylic Jacket	35.00
Porcelain Jacket	45.00
Gold:	
One or Two Piece, with Swaged Cusps:	
Molar or Bicuspid.....	18.00
With Heavy Cast Cusps or All Cast:	
Molar or Bicuspid.....	30.00
Three-Quarter, Any Tooth.....	30.00
20. Bridgework:	
Abutments: (See Crowns and Inlays)	
Pontics:	
Cast Gold, Posterior (Sanitary).....	24.00
Gold and Porcelain:	
Steele's Facing Type.....	24.00
Tru-Pontic Type	30.00
Removable: One Piece Casting Gold or Chrome-	
Cobalt Alloy Clasp Attachment (All types).....	15.00
Pontic (Including Tooth).....	15.00
21. Recementing:	
Inlay	3.00
Crown	3.00
Bridge	5.00
22. Repairs, Crowns, and Bridges:	
Replace Broken Pin Facing with Bryant Repairs.....	7.00
Replace Broken Pin Facing with Steele's Repairs.....	7.00
Replace Broken Steele's Facing where Post Backing is Intact..	5.00
Replace Broken Steele's Facing where Post on Backing is Broken	7.00

23. Dentures:	
Full Upper or Lower:	
Acrylic	\$75.00
Partial Upper or Lower with Two Gold or Cast Chrome—	
Cobalt Alloy Clasps:	
Acrylic	80.00
Partial Lower with Gold or Cast Chrome-Cobalt Alloy	
Lingual Bar and Two Clasps:	
Acrylic	90.00
Partial Upper with Gold or Cast Chrome-Cobalt Alloy	
Palatal Bar with Two Clasps:	
Acrylic	90.00
Clasps, Additional, Gold or Cast Chrome-Cobalt Alloy.....	10.00
Denture Adjustment (See Note 7).....	3.00
24. Repairs, Dentures Acrylic:	
Broken Denture, Repairing (No Teeth Involved).....	10.00
Broken Denture, Repairing and Replacing Broken Teeth:	
Each Tooth, Additional.....	3.00
Replacing Broken Teeth on Denture Only:	
First Tooth	7.00
Each Additional Tooth.....	2.00
Adding Teeth to Partial Denture to Replace Extracted	
Natural Teeth:	
First Tooth	15.00
Each Additional Tooth.....	2.00
Replacing Clasp on Denture; Clasp Intact.....	8.00
Replacing Broken Clasp on Denture with New Clasps.....	18.00
25. Duplication, Upper or Lower, Full or Partial.....	35.00
Rebase or Reline:	
Cured Resin	25.00
Resilient Resin	20.00

NOTE:

- (1) Sufficient scaling of teeth to insure complete and accurate examination will be performed.
- (2) Participating Dentist may elect payment on hourly basis or for fees allowed for services rendered. Additional fee for transportation will not be allowed.
- (3) Prophylaxis should follow.
- (4) Maximum fees allowed for extractions, fractures, and dislocations will include local anesthetic and routine post operative care.
- (5) Fee for impacted teeth within allowable range determined by authorizing officer according to severity of impaction.
- (6) Radiograph, showing completed root-canal therapy, must be submitted.
- (7) Fee for denture adjustment may be authorized when indicated but not to the participating dentist constructing the replacement.
- (8) All fees for fillings to include cement base where indicated without additional charge.

VISUAL AIDS AND SCIENTIFIC EXHIBITS COMMITTEE

Members of this committee met on June 10, 1958, in Durham to discuss what scientific exhibits and films were to be used for the 103rd Annual Session of the North Carolina Dental Society at Pinehurst. All members were present.

SCIENTIFIC EXHIBITS:

The following scientific exhibits have been scheduled:

1. North Carolina Heart Association
2. North Carolina Cancer Society
3. North Carolina Dairy Council
4. University of North Carolina School of Dentistry
5. Division of Oral Hygiene, North Carolina State Board of Health

These exhibits will be displayed in the Cocktail lounge during the entire meeting.

VISUAL AIDS:

The following films have been selected to be shown in the ballroom preceding all main speakers:

Monday

9:00 a.m. Correlation of Structure and Function of the Temporomandibular Joint (1956). Color, magnetic sound, 25 minutes.

2:00 p.m. Pain Control in Children's Dentistry (1956). Color, sound, 30 minutes.

Tuesday

9:00 a.m. Routine Amalgam Technique in Practice of Endodontia (1955). Color, sound, 25 minutes.

2:00 p.m. Hypnosis in Dentistry. Magnetic sound, 32 minutes (1954).

These films will be shown with a projector rented by the Society and operated by one of the members. All films will start promptly at the appointed time.

RECOMMENDATIONS:

In the past the films have been shown in the Pine Room and have escaped the attention of some of the members. We recommend that the films be rescheduled and shown in the Ballroom with the main program in order that they may be seen by more members and also to aid in having the audience seated for the program to follow the film.

BAXTER B. SAPP, JR., *Chairman*

ROBERT H. SAGER

L. K. HEATH

Action by the House of Delegates: Adopted, May 5, 1959.



Informal shot of the receiving line at the Reception: Dr. C. C. Diercks, Mrs. Norman F. Ross, Dr. Ross, Mrs. Leroy W. Peterson, Dr. Peterson and Mrs. A. C. Current.

Report of the Fifth District Trustee

HOWARD B. HIGGINS
D.D.S., F.A.C.D.
Spartanburg, S. C.



DR. HIGGINS

North Carolina Dental Society
May 4, 1959

Dr. Moser, President of the North Carolina Dental Society, Dr. Paul Jeserich, President-Elect of the American Dental Association, Guests, Clinicians, and Members of the North Carolina Dental Society: Your Clinic Committee Chairman is putting on a most instructive program. You are to be congratulated.

It is a real pleasure to bring you greetings from the American Dental Association, its Officers and Trustees. At this time I wish to thank you for the generous support that you have given to us in the past, and I am confident that you will continue to do so in the future. In the short time allotted to me to make my report, I will try to mention only a very few vital things that pertain to the membership of our American Dental Association.

We continue to grow. As of to date we have a larger membership than ever before. But this cannot continue without your honest and loyal support to organized dentistry.

Increase in dues: This is for you to decide upon in your House of Delegates. The American Dental Association, as of this date, spends approximately \$28 per member. It receives only \$20. By hard work and constructive management, the American Dental Association has been able to financially carry on a constructive program of organized dentistry. I think we should, with open minds, consider the increase of dues and help continue the constructive program of organized dentistry.

Legislation: The policies of the American Dental Association's House of Delegates are the ones that we go by. Your House of Delegates has directed that several things be done in 1959. Among them is the Army Dental bill and the Air Force Dental bill. It has instructed your Legislative Council to oppose any legislation that is detrimental to organized dentistry. May I refer to one, pertaining to the Forand-type legislation?

The members of the Legislative Council and our attorneys have appeared before the reference hearings on these types of bills, and greatly opposed any legislation on them. I am glad to report at this time this particular type of legislation is in the committee, and I hope it will continue to stay there for 1959. But it is only with your alertness and

support that we can continue to oppose legislation against the better benefits for the American public, and our profession.

Last fall our House of Delegates instructed the American Dental Association to introduce legislation at this Congress pertaining to the Army and Air Force Dental Corps. I am glad to say that on March 24, 1959, Elmore Rivers introduced legislation pertaining to the Army and Air Force Dental Corps. The numbers of these bills are HR-5984 and HR-5985. Permit me to quote a part of Congressman Rivers' remarks when he presented these bills:

"Mr. Speaker: I am today introducing bills to place the Army and Air Force Dental Service on a par with the high efficiency of the Navy Dental Corps. This legislation has the solid endorsement of the nation's dentists.

"Less than six months ago the American Dental Association, in behalf of its 90,000 members, more than 85 per cent of the practicing dentists of America, reaffirmed its long-standing policy that the dental programs of the Army and the Air Force, like the Navy's, should be under the direction of dentists. Matters pertaining to or that involved their service and professional activities, will be better served by dental directors.

"I believe, further, that Congress has the responsibility to see that military health care programs are administered at the highest level of professional supervision. If that means that Congress must chart legislative guidance for the Army and for the Air Force dental services as it did for the Navy, then I believe we should not hesitate to do so in 1959.

"I introduced and supported for the Navy Dental Corps a counterpart of the bill that I have introduced today. This legislation became Public Law 2984 in the 79th Congress. Under that law, the advancement made by the Navy Dental Corps in developing an outstanding career service is an improvement in the health and dental care of its members, and they have been monumental. One need only look at the records to become convinced that the Navy Dental Corps far excels its sister services of the Army and Air Force.

"For example, the Navy Dental Corps in 1959 had 1,012 regular dental officers, out of a total strength of 1,599 dental officers. The Army had 529 out of 1,749. The Air Force had only 441 regulars out of 1,777. These figures were set forth by the distinguished gentleman, Congressman Vinson, during the recent debate on the Draft Extension bill, No. 2260.

"I believe that the Air Force Dental Bill that I am introducing today will enhance the career programs of the Army and Air Force Dental Services. What is more, they will achieve economy. To date, the personnel turnover in the Army and Air Force Dental Services far exceeds that of the Navy Dental Corps. That unnecessary turnover is not only very expensive, it is very disrupting to the efficient management of essential health care."

These are part of the words that Congressman Rivers stated in his presentation of these bills. I speak to you men of North Carolina, because we cannot get this legislation passed without your support. You, who know your representatives in Congress, and in the Senate, must contact these men and express your wishes and thoughts.

There are approximately thirty-odd bills pertaining to legislation of the Forand type. We have at this time stymied them; but it does not mean that they will not come up, or may not be passed in some form of detrimental legislation in the near future. To you, the men of North Carolina, I present this vital information as the American Dental Association closes a wonderful era of 100 years.

We are about to start upon another century of continued progress. Your age, today, is producing wonderful things, but this can continue only with your guidance and with constructive interest in the affairs of your profession. Only this way will we make progress for tomorrow.

You have been a most kind and gracious audience. It has been a pleasure for me to serve as your Trustee. I thank you.

North Carolina State Board of Dental Examiners

S. W. SHAFFER, D.D.S. (1959) *President*

J. HOMER GUION, D.D.S. (1961),
Secretary-Treasurer

WADE H. BREELAND, D.D.S. (1959)
G. SHUFORD ABERNETHY, D.D.S.
(1960)

S. L. BOBBITT, D.D.S. (1960)
HORACE K. THOMPSON, D.D.S.
(1961)

NORTH CAROLINA STATE BOARD OF DENTAL EXAMINERS

Condensed Cash Receipts and Distributions

Year Ended December 31, 1958

Cash on Hand and in Bank January 1, 1957.....\$11,027.13

Cash Receipts During Year:

Dental Licenses Issued.....	\$ 6,675.00
Hygienist Licenses Issued.....	202.00
Dental Examination Fees.....	2,460.00
Hygienist Examination Fees.....	340.00
Reinstatement Fees	250.00
Penalties for Late Application.....	15.00
Dental Directory	15.00

Total Cash Receipts..... 9,957.00

Total Cash to be Accounted for.....\$20,984.13

Cash Disbursements During Year:

Salaries:

Secretary-Treasurer,	
Dr. J. H. Guion.....	\$ 916.60
Assistant Secretaries,	
Marie W. Michael.....	115.06
Ellen Garrison	911.17
	\$ 1,942.83

Per Diem, Travel and Examination Expense.....	3,723.40
Dues—American Association of Dental	
Examiners	75.00
Postage, Printing and Office Expense.....	1,002.68
Auditing	125.00
Refunded Examination Fees.....	30.00
Telephone and Telegraph.....	32.77
U.N.C. Dental School (Depreciation Fund).....	330.00
Examiners Key Purchased.....	11.02
Office Equipment Purchased: 1-4 Drawer File....	54.25
Attorney and Investigation Fees.....	3,132.42

Total Cash Disbursements..... 10,459.37

Cash on Hand and in Bank December 31, 1958.....\$10,524.76

February 13, 1959

Honorable Luther Hodges
Governor of North Carolina
Raleigh, North Carolina

Dear Sir:

In accordance with the provision of the Dental Law, I wish to hand you herewith a report of the proceedings of the North Carolina State Board of Dental Examiners for the calendar year 1958.

Four meetings of the Board have been held during the year.

A special meeting of the North Carolina Board of Dental Examiners was held at the Carolina Hotel, Pinehurst, North Carolina, January 12, 1958, for the purpose of arranging a schedule for the practical part of the examination to be given beginning June 23, 1958, at the Dental School, University of North Carolina, Chapel Hill, North Carolina, and to dispose of any other business coming before the Board.

All members of the Board were present with Dr. Darden Eure, President, presiding.

Dr. Charles D. Dawkins, of Rockingham, North Carolina, who had asked to appear before the Board, was present and asked that the Board reconsider its action of September 27, 1957, when, at a hearing held in High Point, North Carolina, his license was revoked. After hearing Dr. Dawkins, he was asked to retire from the room and the Board went into executive session. A motion was made and passed that since no new information was brought out by Dr. Dawkins, the Board saw no reason to reconsider its action of September 27, 1957.

A motion was made and passed that Drs. Breeland, Eure, and Guion attend the seminar given by the American Association of Dental Examiners and the workshop given by the American Dental Association's Council on Dental Education to be held in Chicago on January 31 and February 1, 1958, as representatives of the North Carolina State Board of Dental Examiners.

A motion was made and passed that the candidates taking the Board be required to furnish their patients for exodontia, as well as for operative work.

Application for reinstatement of Dr. Nathan R. Callaghan, who passed the Board in 1943 and has been out of the state since 1952, was read and approved.

A request from Dr. William Heeden that he be allowed to work in the State Hospital at Goldsboro as an extern under the supervision of Dr. Duley was approved.

The Secretary reported on the trial held in High Point Superior Court for the County of Guilford on October 15, 16 and 17, 1957, with Judge Susie Sharp presiding, in which the Board obtained an injunction against Enrique Deliz Sanchez, trading as the Deliz Laboratory, to restrain him from the practice of dentistry. Judge Sharp dissolved the temporary restraining order against the North Carolina State Board of Dental Examiners and signed an order October 24, 1957, permanently enjoining Sanchez from violating any of the Dental Practice Act.

The Board voted to meet in Pinehurst on Tuesday, May 6, 1958.

The second meeting was a special meeting of the Board held at the Carolina Hotel, Pinehurst, North Carolina, May 6, 1958, for the purpose of discussing routine matters pertaining to the Board, making plans for the examination to be held at Chapel Hill, North Carolina, beginning June 23, 1958, and to dispose of any other business coming before the Board.

All members of the Board were present, with Dr. Darden Eure, President, presiding.

Dr. Horace Thompson of Wilmington, North Carolina, who was elected to membership on the Board by the North Carolina Dental Society on May 5, 1958, subject to the approval of the Governor was present as an observer.

Dr. James Zealy, Dr. R. E. Williams and Dr. S. D. Poole of Goldsboro,

North Carolina, appeared before the Board relative to some dental work being done near Goldsboro by persons not licensed to practice dentistry. They offered their support to the Board in helping obtain evidence to prosecute the guilty persons.

Application from Dr. F. E. Perkins, of Morganton, North Carolina, for the reinstatement of his license was read and approved.

Application from Dr. J. J. Jordan, of Myrtle Beach, South Carolina, for the reinstatement of his license to practice dentistry was read and approved.

Application from Dr. Leland Horton, of Norfolk, Virginia, for the reinstatement of his license to practice dentistry was read and approved.

The supply houses in the state notified the Board that they would furnish supplies for candidates taking the Board on June 23, 1958, if we would get someone to look after the distribution of the supplies. The Board voted to furnish a man for this duty.

Motion was made and passed that the dental hygienist applicants be required to take full mouth x-rays and mount same as part of their examination.

The Board voted to meet at Chapel Hill, North Carolina, Saturday, June 21, 1958, for the purpose of examining applications of applicants who have applied for examination beginning Monday, June 23, 1958.

The third meeting of the Board of Dental Examiners was the seventy-eighth regular annual meeting and was held at Chapel Hill, North Carolina, beginning Monday, June 23, 1958, for the purpose of examining applicants for licensure, and to dispose of any other business coming before the Board.

The Board met in executive session Saturday afternoon, June 21, 1958, to examine the applications of the applicants for examination, and to arrange the schedule for the examination to begin Monday morning.

All members of the Board were present, with Dr. Darden Eure, President, presiding.

Dr. Horace K. Thompson, of Wilmington, North Carolina, was present as an observer.

Seventy-eight applications for dental examination and seventeen applications for dental hygiene examination were examined, and all except four were found in order. These applicants having withdrawn from the examination, no action was taken. The remaining applicants having complied with the requirements of the North Carolina State Board of Dental Examiners were permitted to take the examination given by the Board. Applicants No. 2, Dr. James J. Ratliff; No. 3, Dr. A. J. Greene; No. 4, Dr. James W. Bennett; No. 5, Dr. Hutson E. McCorkle; No. 7, Dr. F. C. Browne; No. 17, Mr. John. H. Archer; No. 25, Dr. C. H. Isbill; No. 54, Dr. D. C. Evans; No. 72, Mr. F. N. Ogden, II; No. 74, Mr. J. G. Lee, withdrew their applications. Applicants No. 15, Dr. F. T. Rogers; No. 47, Dr. J. T. Ruff; and No. 56, Dr. D. C. Morton, failed to appear for the examination. Dental Hygiene applicant No. 16, Shirley Ann Jordan, withdrew her application.

The written examinations were held in the auditorium of the Memorial Hospital, and the clinical examinations were held in the Dental School of the University of North Carolina.

The application for reinstatement of license of Dr. Forest C. Port, original license No. 1710, was received and approved.

The application for the reinstatement of dental hygiene license for Mrs. Barbara Lewis Grier, original license No. 37, issued in 1952, was received and approved.

Motion made and passed that any applicant for dental license working for the State Board of Health, Department of Oral Hygiene, would not be refunded examination fee should he resign from his position and withdraw his application.

The Board voted to meet at the Sir Walter Hotel, Raleigh, North Carolina, Saturday, July 12, 1958, for the purpose of canvassing the grades of the applicants who participated in the examination beginning June 23, 1958.

The fourth meeting of the State Board was held at the Sir Walter Hotel, Raleigh, North Carolina, on July 12, and 13, 1958, for the purpose of canvassing the grades of applicants examined beginning June 23, 1958, and to transact any other business coming before the Board.

All members of the Board were present with Dr. Darden Eure, President presiding.

Dr. Horace K. Thompson, of Wilmington, North Carolina, newly elected member of the Board, was present.

A motion was made and carried that the salary of the Secretary-Treasurer of the Board be raised from Five Hundred Dollars (\$500.00) per year to Fifteen Hundred Dollars (\$1,500.00) per year.

The officers elected for the ensuing year were as follows:

President—Dr. S. W. Shaffer

Secretary-Treasurer—Dr. J. H. Guion

Delegates to the North Carolina Dental Society:

Dr. Horace K. Thompson

Dr. S. L. Bobbitt

Delegates to the American Association of Dental Examiners at the annual meeting to be held in Dallas, Texas were:

Dr. W. H. Breeland

Dr. S. L. Bobbitt

Dr. J. H. Guion

The results of the tabulation of the grades of the examination revealed the following applicants for dental licensure, having made an average of 80 per cent or more, were issued license to practice dentistry in North Carolina:

Name—Address	License No.
James Bennett Zuccarello, Concord, N. C.....	2557
Richard Malcolm Fields, Ft. Campbell, Ky.....	2558
Jere Edward Roe, Durham, N. C.....	2559
Richard Joseph Citrini, Durham, N. C.....	2560
Galen Warren Quinn, Durham, N. C.....	2561
Robert Charles Gray, Mooresville, N. C.....	2562
Saunders Winston Moore, Burlington, N. C.....	2563
Joel Wyman Baker, Fairmont, N. C.....	2564
William Mitchell Heeden, Jr., Benson, N. C.....	2565
Bennie McBane Johnston, Graham, N. C.....	2566
James Hess Maddox, Charleston, W. Va.....	2567
Edmund Baxter Hopkins, Winston-Salem, N. C.....	2568
Frederick Malloy Chandler, Semora, N. C.....	2569
Harold Winfred Twisdale, Halifax, N. C.....	2570
Charles Augustus Reap, Jr., Chapel Hill, N. C.....	2571
Walter Samuel O'Berry, Edenton, N. C.....	2572
Harold MacPearson Hartsell, Chapel Hill, N. C.....	2573
Julian Horace Fisher, Rocky Mount, N. C.....	2574
William Speigt Debnam, Chapel Hill, N. C.....	2575
Walter Thompson McFall, Jr., Chapel Hill, N. C.....	2576
Frederick Stephens Schnell, Quantico, Va.....	2577
Matthew Thomas Wood, Chapel Hill, N. C.....	2578
Benny Worth Martin, Lawsonville, N. C.....	2579
Wyman Lee Morris, Olanta, S. C.....	2580
John Wilson Atwater, Jr., Burlington, N. C.....	2581
Lewis Palmer Bratton, Raleigh, N. C.....	2582
William Leonard Haltiwanger, Jr., Hamlet, N. C.....	2583
H. Leonidas Keith, Jr., Wilmington, N. C.....	2584
Carl Richard Mundy, Asheville, N. C.....	2585
Vonnie Bryan Smith, Lumberton, N. C.....	2586

Name—Address	License No.
William Ward Ellis, Mayodan, N. C.	2587
John Archibald Seabrooks Reynolds, Charlotte, N. C.	2588
Henry Donaldson Browning, III, Wilson, N. C.	2589
Jerry O'Dell Jernigan, Dunn, N. C.	2590
Jack Everett Silvers, Black Mountain, N. C.	2591
Kenneth Ray Snyder, Chapel Hill, N. C.	2592
Bennie Dale Barker, Chapel Hill, N. C.	2593
Thomas Levi Peacock, Wilson, N. C.	2594
Mitchell Warren Wallace, E. Rockingham, N. C.	2595
James Edward Butler, St. Pauls, N. C.	2596
James Gray Strupe, Chapel Hill, N. C.	2597
Douglas Maurice Young, Winston-Salem, N. C.	2598
James Hugh Lehmann, Sanford, N. C.	2599
Sam Bryce Gibson, High Point, N. C.	2600
Robert Lee Turner, Madison Heights, Va.	2601
Grady Lee Sparks, Chattanooga, Tenn.	2602
John Malcolm McAllister, Raleigh, N. C.	2603
Larston Lee Reitzel, Statesville, N. C.	2604
Perry Milton Noblitt, San Antonio, Texas.	2605
Frederick Grier Hasty, Ft. Sam Houston, Texas.	2606
William Ange Current, Gastonia, N. C.	2607
Carl Dann, III, Chapel Hill, N. C.	2608
Edwin Smith Jewell, Wilmington, N. C.	2609
Carlton Vernon Winter, Chapel Hill, N. C.	2610
Ernest Edmunds Easley, Jr., Burlington, N. C.	2611
John Leslie Andrews, Jr., High Point, N. C.	2612
Samuel Palmer Ausband, Chapel Hill, N. C.	2613
Milton Holley Barnes, Greensboro, N. C.	2614
William Cebert Jarvis, Chapel Hill, N. C.	2615

The following applicants for Dental Hygiene license, having made an average of 80 per cent or more, were issued license to practice dental hygiene in North Carolina:

Mary Pearl Felts, Statesville, N. C.	114
Barbara DeLola Blanton, Shelby, N. C.	115
Margaret Jane Brown, Charlotte, N. C.	116
Loretta Preece Angstadt, Raleigh, N. C.	117
Winifred Rouse Allen, Kinston, N. C.	118
Geneva Lee Frazier, Virginia Beach, Va.	119
Falba JoAnn McClintock, Climax, N. C.	120
Elizabeth Howell, Atlanta, Ga.	121
Betty Ann McGinnis, Monroe, N. C.	122
Ann Ellis Keeter, Shelby, N. C.	123
Nancy Miller Wilkinson, Winston-Salem, N. C.	124
Elizabeth Anne Atwood, Augusta, Ga.	125
Shirley Louise Allen, Charlotte, N. C.	126
Betty Jane Smith, Orange, Va.	127
Carrie Mary Parker, Stony Point, N. C.	128
Elizabeth Harlean Carpenter, Louisville, Ky.	129

The following applicants for dental license, having made an average grade of less than 80 per cent were declared to have failed the examination:

John Loy Garren, Asheville, N. C.
Herbert Scott Withers, Glenville, W. Va.
Walter Stanley Raskowski, Pittsburgh, Pa.
Charles Bernard Jones, Hendersonville, N. C.
Raymond Reynold Meisel, Munster, Ind.
William McKinley White, Chapel Hill, N. C.

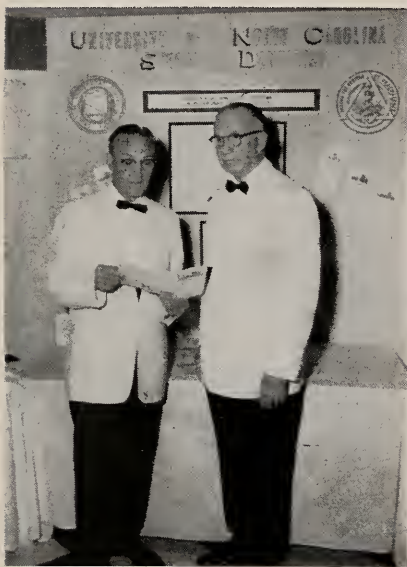
I am enclosing herewith a financial statement of the Board of Dental Examiners as of January 1, 1958, to December 31, 1958, which was compiled by Certified Public Accountants.

Respectfully submitted,
J. H. GUION, D.D.S., *Secretary-Treasurer*
North Carolina State Board of Dental Examiners

Personnel of the Board:

DR. S. W. SHAFFER, *President*
DR. J. H. GUION, *Secretary-Treasurer*
DR. WADE H. BREELAND
DR. G. SHUFORD ABERNETHY
DR. S. L. BOBBITT
DR. HORACE K. THOMPSON

Action by the House of Delegates: Accepted by title, May 3, 1959.



Dr. John C. Brauer, Dean of the UNC School of Dentistry and Dr. Paul H. Jeserich, Dean, School of Dentistry, University of Michigan, pose in front of the exhibit of the UNC School of Dentistry. Dr. Jeserich is President-Elect of the ADA and was guest speaker at the 103rd Annual Session of the NCDS.



The colorful exhibit of the North Carolina Dairy Council.

"Dentistry on the Mission Field"

SANDY C. MARKS, D.D.S.
Belgian Congo



DR. MARKS

North Carolina Dental Society
Sunday, May 3, 1959

Africa is very much in the news today!

In many of the current newspapers and magazines, much is being said about Africa.

This great Continent of 200,000,000 people is moving forward at a rapid pace. It is seeking to take its place among the great nations of the world. It is struggling to come out from under the rule of colonialism to gain self-government and control of its vast natural resources.

Let us remember that while there is today in all Africa a general movement for freedom and political independence, there are certain areas that have been opened up to modern civilization less than one hundred years. I refer particularly to the Belgian Congo where I have been privileged to work during the past eleven years.

The Christian Missions have played a major part in the advancement of the Congolese people. Time does not permit me to go into detail, but to mention a few of the contributions that the Missions have made.

Seventy-five years ago, there was total illiteracy in the Congo. The people all spoke a language in dialect, but not one could read or write. The pioneer missionaries learned their spoken languages, reduced them to writing, produced grammars, and gave them our alphabet. They started education among these primitive people. Even today, about 90 per cent of all education remains in the hands of the Christian Missions. The Congo is 40 per cent literate today . . . the highest in all Africa!

Two Universities have been started in the Colony. The first class to graduate was last year. Seven students out of a starting class of thirty-two received their diplomas. There are very few students who have attained an educational level sufficient to enter the Universities in the Congo. We remember Dr. David Livingstone a medical missionary, who was the first to explore the interior part of Africa now known as the Belgian Congo. The Christian Missions started medical work in the Colony and today carry on a major part of the medical work among the people. It goes without saying that the Christian Missions brought Christ to these people, and about five per cent of the population today is Christian. This is a small percentage, but it exerts a powerful leavening and stabilizing influence among the people. The Bible has been translated into many of the dialects.

This brings us to our subject for tonight of *Dentistry on the Mission Field*, which is quite different from what it is in this country!

In recent weeks I have had the privilege of visiting our School of Dentistry at the University of North Carolina, and the School of Dentistry at the Medical College of Virginia in Richmond. While being shown around these schools, I rejoiced greatly at the things I learned and saw. I was much impressed with the new and modern buildings, the latest in equipment and teaching aids, dedicated teaching personnel, and intelligent students.

At each of these institutions, I heard expressions that went something like this: "Well, we think that we have the best dental school in the world."

When one visits the School of Dentistry at the Christian Medical Institute of our Presbyterian Mission in the Belgian Congo, no attempt is made to include the world in our comparison, we simply say that "We have the best Dental School in the Belgian Congo." We can say this with certainty, because it is the only one in the Colony of 13,000,000 people!

I might add that, by this same method of deductive reasoning, one can also say that it is the worst as well as the best since there is no other one with which to compare it. However, I prefer to think of this school as a "Seed of Modern Dentistry" planted in the heart of Africa—a seed that will grow and multiply to the glory of Christ and His Church in this great land of the future.

To help you better understand dentistry on the mission field, I think it is best to first discuss the NEED of dental care in the Belgian Congo.

By way of comparison, here in the United States the ratio of dentists to population is approximately 1 to 2,500 people. Here it is even difficult to get an appointment with most dentists on short notice. However, dental emergencies are usually cared for within a reasonable length of time.

In the Congo, the ratio of dentists to population is 1 to 350,000 people! There, dental appointments are an impossibility to the greater part of the population. So-called "dental emergencies," in most cases, are resolved by nature without treatment. It is not uncommon for patients to travel as far as 500 miles to see a dentist.

In pioneer days of mission work in the Congo, some Boards recommended to their outgoing missionaries that they have all their teeth extracted and dentures made before going to the field in order to avoid dental emergencies. Many followed this advice!

Some of our early Presbyterian ministers, serving as evangelistic missionaries, recognized this great need for dental care and, while on furlough in this country, studied under practicing dentists in their offices and went back to the field to do what I like to call "Evangelistic Extractions in the Native Villages."

One evangelistic missionary, after such a study during furlough, went back to the field and limited his missionary work to that of dentistry. He served in this capacity for many years until his recent retirement.

When I went to the Congo in 1948, I felt that it was my "call" to full-time Christian work to go for two specific purposes:

First, to care for the dental needs of our 160 Presbyterian missionaries and their children, and

Second, to multiply my services to humanity through the Church by training Congolese in dentistry.

We envisioned from the start the establishment of a dental school, but it took seven years of preparation, and the overcoming of many obstacles before it became a reality. However, we were able to start immediately on our first objective of caring for the missionaries and their children. This was easy, as it consisted mainly of following a routine of dental practice that I had been doing in Wilmington, N. C., for the 15 years previous to 1948.

We were not able to limit our practice in the Congo to the care of our missionaries and their children. As soon as word got out that there was truly an American Dentist on our mission, European patients from as far away as 500 miles started coming to our mission station seeking dental services. It was not our purpose in going to Africa to build up a large European clientele. At the same time, we could not satisfy a

Christian conscience by refusing to help people suffering from tooth-ache. We did our best to help all who came and collected professional fees for the work done on patients outside of our mission. With the profits made from this work we were able to finance the construction of some of the buildings for our dental school and buy a limited amount of equipment. A considerable portion of our equipment has resulted from gifts from our friends in the North Carolina Dental Society and Auxiliary, and from friends in the Richmond Dental Society. We are more than grateful for these gifts which have played a large part in making our work possible.

In preparation for the Dental School for Congolese students, it was necessary to decide on the language to be used. The Tshiluba Dialect, which is the language of the people in our mission area, proved to be completely unscientific and inadequate, as it is spoken only in one section of the Colony. It was decided to teach in the French language, since it is the official language of the Congo Government, spoken throughout the Colony, and taught in the higher schools of learning. This meant that it was necessary for us to learn two foreign languages, Tshiluba and French, which required much effort and time.

There was the question of teaching personnel. How could one dentist organize and operate a dental school? We figured out a plan whereby two dentists working together and operating on a small scale could teach a few students at a time and give them enough training to do simple basic dentistry. In order to insure two dentists being on the field at all times, covering furloughs, it was necessary to have three. Dr. J. B. Jung, Jr., from Zachary, La., joined our staff in 1953. Dr. Bernard G. Jackson, from Chicago, Illinois, joined our staff in 1958.

In co-operation with the medical department of our mission, we worked out plans for the establishment of a Medical Institute to consist of three schools—a School of Nursing (male), a School for Laboratory Technicians, and a School of Dentistry. The teaching staff of this Institution was to consist of seven persons: 2 Medical Doctors, 2 Nurses, 1 Technician and 2 Dentists. By taking in small classes, our instructor-student ratio would be favorable—about 1-10.

There was no law governing dental education in the Congo. So, through correspondence with the "Medecin en Chef" (Chief Medical Officer of the Colony), we worked out a curriculum for our Dental School consisting of 22 courses to be taught in the French language over a period of three years, followed by two years internship before receiving diplomas. Eleven of these 22 courses were to be in the basic sciences and taught in the same classes with the nursing students. By combining classes this way our teaching time would be cut in half. This would leave only 11 courses in dentistry that the two dentists could teach over a period of three years. A further reduction in teaching time could be accomplished by accepting a new class every other year, or one every two years. In this way it seemed possible for two dentists, with teaching help in the basic sciences by the medical department, to operate the dental school. (See attached program for the dental school as approved by the "Medecin en Chef" of the Colony.)

With the above plan in view, we started our Congolese Dental School in 1955 with an enrollment of 19 students in the first class. In June of last year, 1959, six of these original nineteen students finished the first cycle of their training—three years of theory, laboratory and some practical work—and are now working on their two years internship in the clinic before receiving diplomas.

A second class of 11 students was started in the fall of 1957. Five of these were lost due to scholastic failure during their first year. We plan to take in another new class in the fall of this year, 1959.

Our graduates are able to do simple extractions with local anesthesia, partial and complete dentures in acrylics, simple fillings, simple bridge-work, prophylaxis and X-rays.

Although the Belgian Congo is considered one of the richest Colonies in natural resources in all Africa, and many Congolese in responsible



President S. Everett Moser and Secretary-Treasurer Luther H. Butler admire Congolese handiwork on an elephant tusk brought back from Africa by Dr. Sandy C. Marks (right).

positions receive high salaries, the fact remains that the great masses of the people are very poor. The minimum wage law for common labor is about \$10.00 per month. Because of the poverty of the people, we have established for the present a comparatively low tuition fee for our Dental School. It is \$10.00 per year! The students receive food, lodging, clothes, books, medical care and all their necessary supplies. We estimate that the cost per year to our Mission for each student is about \$100.00.

If our students upon graduation decide to work for our Mission in the hospitals and dispensaries of clinics, they will receive salaries for one month's work that will double the amount of money they spent for their entire dental education. If they decide to work for the government or in the hospitals of the mining companies, they will receive salaries much

higher than those paid by the Mission. Regardless of where they decide to practice their profession, the question of salary is not the most important consideration. They are being trained as Christian Witnesses in Dentistry, to fill a great NEED in their land, the giving of dental health to their people.

No : 76/57-ORG (Annexe)

PROGRAMME DES ECOLES DE DENTISTERIE

ANNEE SCOLAIRE : de 1er Octobre au 30 Juin
COURS : 32 semaines (896 Heures disponibles)
REVISION et EXAMENS : 4 semaines.
ASSISTANCE EN CLINIQUE DENTAIRE : 12 semaines.
JOURS FERIES, DIVERS : 4 semaines.

PREMIERE ANNEE

Compléments de Français.....	64 heures.
Compléments d'Arithmétique	64 heures.
Administration	30 heures.
Eléments d'Anatomie, Histologie, Physiologie.....	64 heures.
Anatomie, Histologie, Physiologie dentaires.....	32 heures.
Anatomie topographique de la tête et du cou.....	32 heures.
Hygiène Générale	32 heures.
Déontologie	20 heures.

(Total—338 heures—environ 10 heures 30 min par semaine)

DEUXIEME ANNEE

Compléments de Français.....	32 heures.
Pathologie Générale	30 heures.
Hématologie, Bactériologie (théorie et pratique).....	30 heures.
Maladies Infectieuses et Parasitaires.....	40 heures.
Pathologie de la tête et du cou (interne et ext).....	12 heures.
Dentisterie opératoire (théorie).....	50 heures.
Prothèse amovible (théorie).....	32 heures.
Clinique dentaire	120 heures.
Laboratoire dentaire	320 heures.
Pathologie dentaire	32 heures.
Pathologie Chirurgicale Générale.....	10 heures.
Déontologie (rappel)	10 heures.

(Total—718 heures—environ 22 heures 30 min par semaine)

TROISIEME ANNEE

Pharmacologie dentaire	10 heures.
Radiographie dentaire	16 heures.
Orthodontie	16 heures.
Prothèse conjointe (théorie).....	64 heures.
Clinique dentaire	380 heures.
Laboratoire dentaire	320 heures.

(Total—806 heures—25 heures par semaine)

QUATRIEME ANNEE ET CINQUIEME ANNEE

Stage: Soins dentaires, prothèse dentaire.....	21 mois.
Préparation, examen final théorique et pratique.....	3 mois.

76 ENSEIGNEMENT MEDICAL

Léopoldville, le 18 Aout 1956

House of Delegates

ATTENDANCE RECORD

DELEGATES	M E E T I N G S			
	First May 3	Second May 4	Third May 5	Fourth May 6
OFFICERS				
Luther H. Butler	X	X	X	X
S. Everett Moser	X	X	X	X
W. B. Sherrod	X	X	X	X
Charles H. Teague	X	X	X	X
EXECUTIVE COMMITTEE				
R. B. Barden	X	X	X	X
Norman F. Ross	X	X	X	X
Moultrie H. Truluck		X	X	X
ETHICS COMMITTEE				
H. K. Crofts				
H. D. Froneberger	X	X		X
G. L. Hooper	X	X	X	X
Clyde E. Minges				
C. C. Poindexter	X	X	X	X
STATE BOARD OF HEALTH —MEMBER				
Z. L. Edwards	X	X		X
STATE BOARD OF DENTAL EXAMINERS				
S. L. Bobbitt	X	X	X	X
Horace K. Thompson	X	X		X
FIRST DISTRICT				
Dennis S. Cook	X	X	X	X
H. D. Froneberger				
A. T. Lockwood		X	X	X
A. L. Poovey	X	X	X	X
C. B. Taylor	X	X	X	X
R. D. Coffey (A)	X	X	X	X
SECOND DISTRICT				
Boyce A. Brawley	X	X		X
James A. Harrell	X	X	X	
W. S. Peery	X	X		X
J. P. Reece	X	X	X	X
William F. Yelton	X	X	X	X
J. V. Davis, Jr. (A)				X
H. C. Harrelson, Jr. (A)			X	

DELEGATES	M E E T I N G S			
	First May 3	Second May 4	Third May 5	Fourth May 6
THIRD DISTRICT				
W. K. Griffin		X	X	X
W. P. Hinson, Jr.	X	X	X	
M. R. Hunter	X	X	X	
C. W. Poindexter	X	X	X	X
Guy R. Willis	X		X	X
M. L. Cherry (A)				X
S. T. Hart (A)				X
T. E. Sikes (A)	X			
FOURTH DISTRICT				
W. Howard Branch	X	X	X	X
Marvin T. Jones, Jr.	X		X	
C. P. Osborne, Jr.	X	X	X	X
E. A. Pearson, Jr.	X	X	X	X
J. B. Powell	X	X	X	X
L. D. Herring (A)		X		
FIFTH DISTRICT				
C. C. Gooding				
R. Fred Hunt	X	X	X	X
Paul E. Jones	X	X		
L. R. Turner	X	X	X	X
W. W. Umphlett	X	X	X	X
R. B. Barden (A)				
Charles Cooke (A)				
Z. L. Edwards, Jr. (A)				X
Wesley Gooding (A)				
William H. Gray, Jr. (A)		X		
Roy Miller (A)				
W. T. Ralph (A)				X
TOTALS	35	37	32	37

(A) indicates Alternate Delegate

1959 House of Delegates in session.



Scientific Sessions

ESSAYISTS
CLINICIANS

ESSAYISTS

Stanley C. Harris, Ph.D., Chicago, Illinois.
S. Meigs Jones, D.D.S., Kansas City, Missouri.
Leroy W. Peterson, D.D.S., F.A.C.D., Clayton, Missouri.

CLINICIANS

ENDODONTICS: David H. Becker, D.D.S., Asheville; Luther H. Butler, D.D.S., Greensboro; J. G. Crowell, D.D.S., Hendersonville; J. B. Freedland, D.D.S., Charlotte.

OPERATIVE DENTISTRY: Albert P. Cline, D.D.S., Canton; Joseph M. Johnson, D.D.S., Laurinburg; Charles M. Johnston, D.D.S., Charlotte; C. P. Osborne, Jr., D.D.S., Lumberton; Norman F. Ross, D.D.S., Durham; Clarence L. Sockwell, D.D.S., UNC School of Dentistry; Robert H. Watson, D.D.S., Charlotte.

ORTHODONTICS: W. L. Hand, Jr., D.D.S., New Bern; Eugene N. Shapiro, D.D.S., Asheville.

PATHOLOGY: Robert H. Sager, D.D.S., UNC School of Dentistry.

PERIODONTICS: H. Royster Chamblee, D.D.S., Raleigh; Walter T. McFall, Jr., D.D.S., UNC School of Dentistry; G. C. Stowe, D.D.S., Charlotte; B. N. Walker, D.D.S., Charlotte.

PROSTHODONTICS: Leonard B. Barber, D.D.S., Hendersonville; Benjie D. Barker, D.D.S., UNC School of Dentistry; Nathan R. Callaghan, Jr., D.D.S., Durham; L. G. Coble, D.D.S., Greensboro; Norman J. Holly, D.D.S., Hendersonville; C. A. Pless, D.D.S., Asheville; Norman F. Ross, D.D.S., Durham; Baxter B. Sapp, Jr., D.D.S., Durham; J. O. Thorpe, D.D.S., Charlotte; S. B. Towler, D.D.S., Raleigh; Matthew T. Wood, D.D.S., UNC School of Dentistry.

NORTH CAROLINA DENTAL ASSISTANTS' ASSOCIATION: Mrs. Louis Primm.

NORTH CAROLINA DENTAL HYGIENISTS' ASSOCIATION: Mrs. Loretta Angstadt.

General Sessions

MAY 3, 1959, 8:30 P.M.

MAY 4, 1959, 9:30 A.M.

MAY 4, 1959, 8:00 P.M.

MAY 6, 1959, 11:30 A.M.

FIRST GENERAL SESSION

Sunday, May 3, 1959

The First General Session of the 103rd Annual Session of the North Carolina Dental Society was called to order by President S. Everett Moser in the Ballroom of The Carolina, Pinehurst, North Carolina, at 8:45 p.m., Sunday, May 3, 1959.

The invocation was offered by Dr. William F. Yelton.

A memorial service was conducted by Dr. Boyce A. Brawley, Chairman of the Necrology Committee, in memory of the following members who had died during the past year:

C. Micheaux Beam, D.D.S.

Ernest A. Branch, D.D.S.

Arthur Hynes Fleming, D.D.S.

Lill Gaston Hair, D.D.S.

Paul T. Harrell, D.D.S.

Ralph R. Howes, D.D.S.

William Harrison Vander Linden,
D.D.S.

Samuel Horace McCall, D.D.S.

Cleveland McClure Peeler, D.D.S.

Wade Coleman Raymer, D.D.S.

Jasper W. Stanley, D.D.S.

Joseph Conrad Watkins, D.D.S.

Mrs. Walter E. Clark, President, North Carolina Dental Auxiliary, brought greetings to the Society from the Auxiliary and presented President Moser a check in the amount of \$2,542.94 payable to the North Carolina Dental Society Relief Fund which represented the proceeds from the annual Scrap Amalgam Drive sponsored by the Auxiliary. President Moser expressed the gratitude of the Society for this achievement on the part of the women and to Mrs. J. Walton Branham who headed the drive.

The following brought greetings from their organizations: Miss Sarah Bizell, President, North Carolina Dental Assistants' Association; Mrs. P. C. Hoppe, Vice President, North Carolina Dental Hygienists' Association; and Dr. C. C. Poindexter, President, Dental Foundation of North Carolina, Incorporated.

Guests from out-of-state were introduced and welcomed by Dr. Walter T. McFall, Chairman, Entertainment of Out-of-State Visitors Committee.

Dr. Ralph D. Coffey introduced Dr. Sandy C. Marks of the Belgian Congo, Africa, who spoke on "Dentistry on the Mission Field."

The meeting was adjourned at 10:15 p.m.

SECOND GENERAL SESSION

Monday Morning, May 4, 1959

The Second General Session of the 103rd Annual Session of the North Carolina Dental Society was called to order by President Moser in the Ballroom of The Carolina, Pinehurst, North Carolina, at 9:45 a.m., Monday, May 4, 1959.

The invocation was offered by Dr. Walter T. McFall.

Dr. Luther H. Butler read a message from Dr. Clyde E. Minges expressing his wishes for a successful meeting and his regret that he could not attend because of illness.

Dr. Frank O. Alford introduced Dr. Howard B. Higgins of Spartanburg, South Carolina, who presented his report as Trustee of the Fifth District of the American Dental Association.

Dr. John C. Brauer introduced Dr. Paul H. Jeserich of Ann Arbor, Michigan, President-Elect of the American Dental Association. Dr. Jeserich addressed the General Session on "Some Problems Facing the Dental Profession as it Completes its First One Hundred Years."

President Moser relinquished the chair to Vice-President Charles H. Teague.

Dr. Moser presented the President's Address.

Dr. Teague appointed the following to the Committee on the President's Address: Dr. C. W. Sanders, Chairman; Dr. A. C. Current; and Dr. D. L. Pridgen.

President Moser then resumed the chair and introduced Dr. T. G. Nisbet, Chairman, Program Committee.

Following a scientific session the meeting was adjourned at 1:00 p.m.

THIRD GENERAL SESSION

Monday Evening, May 4, 1959

The Third General Session of the 103rd Annual Session of the North Carolina Dental Society was called to order by President Moser in the Ballroom of The Carolina, Pinehurst, North Carolina, at 8:30 p.m., Monday, May 4, 1959.

The invocation was offered by Dr. Ralph D. Coffey.

President Moser announced the appointment of the following to serve as tellers for the election of officers: Dr. W. Howard Branch, Dr. Neal Sheffield, Dr. T. G. Nisbet and Dr. Howard S. Rhyne.

The officers of the North Carolina Dental Society for 1959-1960 were elected as follows:

President-Elect—Luther H. Butler, Greensboro.

Vice President—L. Franklin Bumgardner, Charlotte.

Secretary-Treasurer—S. Byron Towler, Raleigh.

Members of the North Carolina State Board of Dental Examiners elected to succeed themselves were: Wade H. Breeland (1962), Belmont; S. W. Shaffer (1962), Greensboro.

Delegates to the American Dental Association House of Delegates elected to succeed themselves were: Walter T. McFall (1962), Asheville; C. C. Pindexter (1962), Greensboro.

By a majority vote it was decided that the Annual Session in 1961 would be held in Pinehurst.

The meeting was adjourned at 9:30 p.m.

FOURTH GENERAL SESSION

Wednesday, May 6, 1959

The Fourth General Session of the 103rd Annual Session of the North Carolina Dental Society was called to order by President Moser in the Ballroom of The Carolina, Pinehurst, North Carolina, at 11:45 a.m., Wednesday, May 6, 1959.

The invocation was offered by Dr. H. Royster Chamblee.

Executive Secretary Andrew M. Cunningham announced that registration for the 103rd Annual Session set a new record with 1,535 in attendance, including 704 members.

Dr. Walter T. McFall presented Dr. and Mrs. Sandy C. Marks with a gift in the form of a check from friends in the Society as an expression of love and admiration for the work being done by the Marks family in the mission field in the Belgian Congo.

President Moser installed Dr. W. B. Sherrod as President of the North Carolina Dental Society for the year 1959-1960.

Dr. Sherrod installed the newly elected officers as follows:



The Variety Show made a big hit with everyone. Above is an action shot of the Dentones, popular vocal group of Asheville dentists who captivated a SRO audience (below) in The Carolina Ballroom with their barbershop harmonies.

President-Elect—Luther H. Butler.

Vice President—L. Franklin Bumgardner.

Secretary-Treasurer—S. Byron Towler.

Members of the North Carolina State Board of Dental Examiners—Wade H. Breeland and S. W. Shaffer.

Delegates to American Dental Association—Walter T. McFall and C. C. Poindexter.

Dr. Sherrod announced the appointment of Dr. Riley E. Spoon, Jr., of Winston-Salem as Chairman of the Executive Committee.

The 103rd Annual Session of the North Carolina Dental Society was adjourned at 12:15 p.m. *sine die*.

(Following adjournment door prizes were awarded.)

103RD ANNUAL SESSION

Pinehurst, North Carolina

May 3-6, 1959

REGISTRATION

NCDS Members

First District	114	
Second District	175	
Third District	187	
Fourth District	131	
Fifth District	97	704
Auxiliary		215
Dental Assistants		72
Dental Hygienists		33
Dental Students		181
Exhibitors		124
Guests		206
Total Registration		1,535

SAVE YOUR SCRAP AMALGAM

for the

N. C. Dental Auxiliary Scrap Amalgam Drive

March 7-12, 1960

All proceeds go to

N.C.D.S. RELIEF FUND

Directory

NORTH CAROLINA DENTAL SOCIETY
OFFICERS AND COMMITTEES 1959-
1960

ROSTER OF MEMBERS

LIST OF PAST PRESIDENTS

N. C. DENTAL ASSISTANTS' ASSOCIA-
TION OFFICERS 1959-1960

N. C. DENTAL AUXILIARY OFFICERS
1959-1960

N. C. DENTAL HYGIENISTS' ASSOCIA-
TION OFFICERS 1959-1960

NORTH CAROLINA DENTAL SOCIETY

1959-1960

OFFICERS

W. B. SHERROD, *President*

LUTHER H. BUTLER, *President-Elect*

L. FRANKLIN BUMGARDNER, *Vice President*

S. BYRON TOWLER, *Secretary-Treasurer*

CLINTON C. DIERCKS, *Editor-Publisher*

ANDREW M. CUNNINGHAM, *Executive Secretary*

EXECUTIVE COMMITTEE

RILEY E. SPOON, JR. (1962), *Chairman*

NORMAN F. ROSS (1961)

MOULTRIE H. TRULUCK (1960)

DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

FRANK O. ALFORD (1961)

WALTER T. McFALL (1962)

WILBERT JACKSON (1960)

C. C. POINDEXTER (1962)

PAUL E. JONES (1960)

BERNARD N. WALKER (1961)

ALTERNATE DELEGATES TO THE AMERICAN DENTAL ASSOCIATION

L. FRANKLIN BUMGARDNER

W. B. SHERROD

LUTHER H. BUTLER

RILEY E. SPOON, JR.

CLINTON C. DIERCKS

S. BYRON TOWLER

STANDING COMMITTEES

ADVISORY COMMITTEE FOR VETERANS ADMINISTRATION PRO-
GRAM—B. N. Walker (1962), *Chairman*; H. E. Plaster (1961), C. H.
Teague (1960), L. D. Herring (1963), Coyte R. Minges (1964).

CLINIC COMMITTEE—Z. L. Edwards, Jr., *Chairman*; G. L. Bitler,
J. D. Southworth, H. E. Plaster, Charles A. Jarrett.

CONSTITUTION AND BY-LAWS COMMITTEE — Z. L. Edwards
(1961), *Chairman*; D. T. Carr (1964), Marcus R. Smith (1962), B. N.
Walker (1960), Ralph L. Falls (1963).

COUNCIL ON DENTAL HEALTH AND INFORMATION—E. A. Pearson, Jr. (1963), Chairman; L. B. Peeler (1964), Harry A. Karesh (1962), E. S. Benson, Jr. (1961), S. H. Isenhower (1960).

ETHICS COMMITTEE—G. L. Hooper (1962), Chairman; A. C. Current, Jr. (1964), C. E. Minges (1961), H. K. Crotts (1960), C. C. Poindexter (1963).

EXHIBIT COMMITTEE—W. Penn Marshall, Chairman; C. S. Cooke, R. S. Hunter, S. H. Isenhower, S. T. Hart.

INSURANCE COMMITTEE—W. J. Turbyfill (1960), Acting Chairman; T. L. Blair (1964), E. L. Eatman (1962), S. P. Gay (1961), J. R. Edwards (1963).

LEGISLATIVE COMMITTEE—S. W. Shaffer (1964), Chairman; C. W. Sanders (1960), W. T. McFall (1962), Paul E. Jones (1961), E. U. Austin (1963).

LIBRARY AND HISTORY COMMITTEE — Neal Sheffield (1963), Chairman; S. H. Steelman (1960), R. Fred Hunt (1961), H. Royster Chamblee (1962), Frank O. Alford (1964).

COMMITTEE TO BRING THE HISTORY OF THE NORTH CAROLINA DENTAL SOCIETY UP-TO-DATE (A sub-committee of the Library and History Committee)—Neal Sheffield, Chairman, F. O. Alford, Z. L. Edwards, J. H. Guion, H. C. Carr, C. E. Minges, C. W. Sanders.

MEMBERSHIP COMMITTEE—Luther H. Butler, Chairman; A. T. Lockwood, J. A. Harrell, W. P. Hinson, Jr., C. P. Osborne, Jr., R. B. Barden.

NECROLOGY COMMITTEE—Boyce A. Brawley (1963), Chairman; Dewey Boseman (1964), W. D. Yelton (1962), D. T. Carr (1961), Marcus R. Smith (1960).

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LIAISON COMMITTEE TO THE OLD NORTH STATE DENTAL SOCIETY—Dennis S. Cook, Chairman; Marvin T. Jones, Jr., H. Estes Butler, J. P. Reece, R. B. Barden.

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PRESIDENTS OF THE NORTH CAROLINA DENTAL SOCIETY SINCE ITS ORGANIZATION

1856.....	*W. F. Bason	1916-17.....	*R. O. Apple
1857.....	*E. H. Andrews	1917-18.....	*R. M. Squires
1858.....	*B. F. Arrington	1918-19.....	*J. N. Johnson
1866.....	*B. F. Arrington	1919-20.....	W. T. Martin
1875-76.....	*B. F. Arrington	1920-21.....	*J. H. Judd
1876-77.....	*V. E. Turner	1921-22.....	*W. M. Robey
1877-78.....	*J. W. Hunter	1922-23.....	S. R. Horton
1878-79.....	*E. L. Hunter	1923-24.....	*R. M. Morrow
1879-80.....	*D. E. Everitt	1924-25.....	J. A. McClung
1880-81.....	*Isaiah Simpson	1925-26.....	*H. O. Lineberger
1881-82.....	*M. A. Bland	1926-27.....	B. F. Hall
1882-83.....	*J. R. Griffith	1927-28.....	*E. B. Howle
1883-84.....	*W. H. Hoffman	1928-29.....	I. R. Self
1884-85.....	*J. H. Durham	1929-30.....	*J. H. Wheeler
1885-86.....	*J. E. Matthews	1930-31.....	Paul E. Jones
1886-87.....	*B. H. Douglas	1931-32.....	*Dennis Keel
1887-88.....	*T. M. Hunter	1932-33.....	Wilbert Jackson
1888-89.....	*V. E. Turner	1933-34.....	*Ernest A. Branch
1889-90.....	*S. P. Hilliard	1934-35.....	L. M. Edwards
1890-91.....	*H. C. Herring	1935-36.....	Z. L. Edwards
1891-92.....	*C. L. Alexander	1936-37.....	D. L. Pridgen
1892-93.....	*F. S. Harris	1937-38.....	J. F. Reece
1893-94.....	*C. A. Rominger	1938-39.....	G. Fred Hale
1894-95.....	*H. D. Harper	1939-40.....	F. O. Alford
1895-96.....	*R. H. Jones	1940-41.....	*C. M. Parks
1896-97.....	*J. E. Wyche	1941-42.....	C. C. Poindexter
1897-98.....	*H. V. Horton	1942-43.....	*Paul Fitzgerald
1898-99.....	*C. W. Banner	1943-44.....	Clyde E. Minges
1899-1900.....	*A. C. Liverman	1944-45.....	O. C. Barker
1900-01.....	*E. J. Tucker	1946-47.....	E. M. Medlin
1901-02.....	*J. S. Spurgeon	1947-48.....	R. M. Olive
1902-03.....	*J. H. Benton	1948-49.....	C. W. Sanders
1903-04.....	*J. M. Fleming	1949-50.....	Walter T. McFall
1904-05.....	*W. B. Ramsey	1950-51.....	A. S. Bumgardner
1905-06.....	*J. S. Betts	1951-52.....	R. Fred Hunt
1906-07.....	*J. R. Osborne	1952-53.....	A. C. Current
1907-08.....	*D. L. James	1953-54.....	Neal Sheffield
1908-09.....	*F. L. Hunt	1954-55.....	B. N. Walker
1909-10.....	*J. C. Watkins	1955-56.....	*J. W. Branham
1910-11.....	*A. H. Fleming	1956-57.....	H. K. Thompson
1911-12.....	*P. E. Horton	1957-58.....	R. D. Coffey
1912-13.....	*R. G. Sherrill	1958-59.....	S. E. Moser
1913-14.....	*C. F. Smithson	1959-60.....	W. B. Sherrod
1914-15.....	*J. A. Sinclair		
1915-16.....	*I. H. Davis		

*Deceased



Officers for 1959-1960. President W. B. Sherrod of Winston-Salem congratulates Dr. Luther H. Butler of Greensboro upon his election as President-Elect. Other new officers are: Dr. S. Byron Towler of Raleigh, Secretary-Treasurer and Dr. L. Franklin Bumgardner of Charlotte, Vice President.

For
**ADDRESS or TELEPHONE NUMBER
 CHANGES or CORRECTIONS**

Write
**Executive Secretary
 North Carolina Dental Society
 P. O. Box 11065
 Raleigh, North Carolina**

ROSTER OF MEMBERS

In Good Standing

August 1, 1959

(Districts are indicated by number immediately following the name.
Telephone numbers are given if this information was available.)

Abernethy, A. D. (1) 14 Crestview St. (384)	Granite Falls
Abernethy, C. E. (4) 705 Professional Bldg. (TE 2-6038)	Raleigh
Abernethy, C. V. (1) Powell St. (CH 5-2344)	Forest City
Abernethy, David (1) Abernethy Professional Bldg.	Hickory
Abernethy, G. Shuford (1) 407 2nd St., N.W.	Hickory
Adair, John T. (1)	Newton
Adams, C. A., Jr (3) Fidelity Bank Bldg.	Durham
Adams, Claude A., III (3) 1526 Hermitage Court (7-3233)	Durham
Adams, Roy Graham (3) Box 188 (649)	Hamlet
Adcock, G. W. (4)	Fuquay Springs
Agress, Bernard D. (2) Blalock Bldg. (PA 4-7738)	Pilot Mountain
Albright, L. B. (2) 311 Independence Bldg. (EM 6-0180)	Charlotte
Aldridge, M. W. (5) 1005 E. 4th St. (2013)	Greenville
Alexander, George S. (2) 323 Professional Bldg. (5651)	Kannapolis
Alexander, W. E. (3) (3791)	Robbins
Alford, Frank O. (2) 1001 Liberty Life Bldg. (ED 2-0841)	Charlotte
Allen, Howard L. (4) Box 503 (472)	Henderson
Allen, Sidney V. (5) 202 Murchison Bldg. (NE 6-0900)	Wilmington
Allen, Thomas I. (2) 816 Poindexter Drive	Charlotte 3
Almond, C. Franklin (3) 234 Settle St. (Dickens 9-9347)	Reidsville
Alspaugh, L. S. (3) 205 Wolfe Bldg.	Greensboro
Anderson, G. N. (3) 206 Church St.	High Point
Andreve, K. I. (3) 153 Bishop St. (BR 4-1750)	Greensboro
Andrews, John L., Jr. (3) 812 Carrick Ave. (9725)	High Point
Andrews, Victor Lee (2) 21 Court Square (627)	Mocksville
Apple, Howard D. (3) 1205 Richardson Drive (DI 9-5222)	Reidsville
Armstrong, W. L., Jr. (1) 111 E. Main St.	Cherryville
Ashby, John L. (2) Box 728 (234)	Mount Airy
Atwater, Frank G. (3) 1202 Madison Ave. (BR 3-4945)	Greensboro
Atwater, John W., Jr. (3) 138 Scarboro St. (3275)	Asheboro
Atwood, T. W. (3) 9 Carolee Apts., Elder St. (3-0599)	Durham
Ausbund, Samuel P. (2)	
3821 Reynolda Road (WA 4-9280)	Winston-Salem
Ausley, Mett B. (5) Box 476 (640)	Warsaw
Austin, Edward U. (2) 505 Doctors Bldg. (ED 3-0395)	Charlotte 7
Aycock, B. L. (4) (2791)	Princeton
Bain, C. D. (4) Box 466 (2555)	Dunn
Baker, Claude R. (3) School of Dentistry, University of Kansas City, 10th St. & Troost Ave.	Kansas City 6, Mo.
Baker, E. D. (4) 817 Professional Bldg. (TE 2-6327)	Raleigh
Baker, L. P. (1) (132)	Kings Mountain
Baker, R. N. (1) (132)	Kings Mountain
Baldwin, Harry N. (2) P. O. Box 1006 (984)	North Wilkesboro
Ballard, David L. (2) 219 Sedgfield Road (JA 3-0551)	Charlotte
Banker, L. L., Jr. (2) 524 Professional Bldg.	Charlotte
Barber, A. D. (4) (3-4161)	Sanford
Barber, L. B., Jr. (1) 5th Ave. Clinic, 726 5th Ave. (4205)	Hendersonville
Barden, R. B. (5) 1002 Murchison Bldg. (3-2234)	Wilmington
Barker, Bennie D. (3) UNC School of Dentistry (8-8131)	Chapel Hill
Barker, C. T. (5) 514 Broad St., Apt. A-1	New Bern
Barker, O. C. (1) P. O. Box 486	Asheville
Barkley, Carl A. (2) 740 Nissen Bldg.	Winston-Salem
Barksdale, Stuart A. (2) 922 Doctors Bldg. (FR 7-3382)	Charlotte
Barnes, V. M. (5) Box 1426 (3329)	Wilson
Barringer, Martin DeBerry (3)	
Apt. 3, Building 29, USNS (2641, Ext. 266)	Green Cove Springs, Fla.

Barringer, M. R. (1) P. O. Box 386 (IN 4-0501)	Newton
Barton, Roger E. (3) UNC School of Dentistry (8-5793)	Chapel Hill
Beam, R. S. (4) 603 Professional Bldg. (TE 3-6024)	Raleigh
Beasley, Britton F. (5) Kinston Clinic	Kinston
Beavers, D. L. (2) Bowman Gray School of Medicine	Winston-Salem
Beavers, Franklin C. (2) 640 Nissen Bldg.	Winston-Salem
Beck, Charles H. (4) 2629 Raeford Road (HUDson 4-2061)	Fayetteville
Becker, D. H. (1) 704 Flatiron Bldg. (AL 3-9716)	Asheville
Bell, Franklin D. (4) Professional Bldg. (TE 2-2183)	Raleigh
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Bell, John T. (3) 111 Corcoran (2-1951)	Durham
Bell, Morris L. (4) 204 Sampson St. (3979)	Clinton
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Belvin, D. L. (2) 709 Liberty Life Bldg.	Charlotte
Bencini, E. A. (3) 330 Locke St.	High Point
Benfield, Robert H. (2) 1508-09 Liberty Life Bldg.	Charlotte
Bennett, C. C. (1) 407 Flatiron Bldg.	Asheville
Bennett, Jack (4) 409 S. Washington Ave.	Dunn
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Biddell, Alex J. (4) Box 628 (CR 6-3441)	Laurinburg
Biddell, F. H. (4) (CR 6-2475)	Laurinburg
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Bingham, J. P., Jr. (2) Box 124 (CH 6-2988)	Lexington
Bishop, E. L. (2) 211 Hawthorne Lane (ED 2-5354)	Charlotte
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Bland, Donald E. (5)	Wallace
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Bonner, A. B. (5)	Hertford
Booe, I. A. (2) (KU 3-8675)	King
Boseman, Dewey (5) (3416)	Wilson
Bost, John Dewey (1) 434 Highland Ave., S.E.	Hickory
Bottoms, Alton W. (1) (2627)	Canton
Bowden, H. B. (5) (7521)	Bethel
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Bowling, Howard X. (3) 704 Depositors National Bank Bldg. (4-6422)	Durham
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Brooks, Robert Edgar (4) 1601 Ramsey St. (HE 3-1117).....	Fayetteville
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Broughton, J. O. (5) 104 Murchison Bldg. (RO 2-4436).....	Wilmington
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Brown, J. W. (5) (158-J).....	Rich Square
Browning, Henry D., III (5) 207 Connor St. (4437).....	Wilson
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Bryan, J. K. (4) Box 426 (3365).....	Oxford
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Bumgardner, A. S. (2) 1516 Elizabeth Ave. (ED 3-9245).....	Charlotte
Bumgardner, L. F. (2) 401 Doctors Bldg. (ED 3-2025).....	Charlotte
Burns, E. R. (3) (9-3831).....	Chapel Hill
Burns, William T. (3) Box 1028 (9-3831).....	Chapel Hill
Burroughs, Robert C., Jr. (2) 1401 N. Independence Blvd. (FR 5-6210).....	Charlotte
Burrus, Roy G., Jr. (1) Box 1252.....	Shelby
Butcher, Dale H. (3) Box 175 (4551).....	Guilford College
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Butler, Luther H. (3) 406 Jefferson Standard Bldg. (BR 2-4740).....	Greensboro
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Byrd, Robert T. (4) 411-414 Professional Bldg. (TE 2-8859).....	Raleigh
Byrd, Thomas H., Jr. (4) 616 Professional Bldg. (TE 3-1832).....	Raleigh
Byrd, Worth M. (4) Box 522 (SPring 3-7111).....	Sanford
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Caldwell, J. B. (3) 1817 Pembroke (BR 2-0694).....	Greensboro
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Cameron, L. A. (4) P. O. Box 338 (4046).....	St. Pauls
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Campbell, Walter Edward (5) 900 Sunset Ave. (6-6265).....	Rocky Mount
Campbell, William R. (3) 624 Quaker Lane (2-1224).....	High Point
Candler, C. Z., Jr. (1) 310 City Hall Bldg. (AL 2-4051).....	Asheville
Canrobert, C. W., Jr. (1) 822 1st Ave., S. (IN 4-4722).....	Conover
Carlough, Robert Donald (2) Route 4.....	Concord
Carpenter, Joseph P. (1) 104 Maine Road (OX 3-5306).....	Key West, Fla.
Carpenter, M. W. (1) 675 Biltmore Ave. (AL 2-1259).....	Asheville
Carpenter, W. W. (1) 4th Avenue, West (5913).....	Hendersonville
Carr, Daniel T. (3) 915 Lamond Ave. (2-4016).....	Durham
Carr, Henry C. (3) 409 Watts St. (2-4091).....	Durham
Carrell, George H. (1) 727 Haywood Road.....	West Asheville
Carson, John R. (5) P. O. Box 91.....	Rocky Mount
Carter, George K. (2) P. O. Box 185 (2112).....	Taylorsville
Casey, R. P. (2) Box 406.....	North Wilkesboro
Cash, Allan H. (2) 304 Hawthorne Medical Center.....	Charlotte
Caudle, James N. (3) Box 145 (BR 5-1000).....	Greensboro
Chamberlain, Vander F. (3) 104 E. Naomi St. (3732).....	Randleman
Chamblee, H. Royster (4) 818 Professional Bldg. (TE 2-7878).....	Raleigh
Chandler, F. H. (2) P. O. Box 255 (ME 6-1401).....	Salisbury
Chandler, Frederick M. (3) Box 333 (8-2012).....	Roxboro
Chapin, M. E. (3) UNC School of Dentistry (9-1471).....	Chapel Hill
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Clinard, Robert W. (2) RFD 6	Winston-Salem
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Cline, Albert P., Jr. (1) Medical Bldg.	Canton
Coble, Albert V. (3) Box 1583	Burlington
Coble, L. G. (3) 330 Jefferson Bldg. (BR 2-5722)	Greensboro
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Cox, Vernon H. (2) 636 Reynolds Bldg. (PA 2-5481)	Winston-Salem
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Current, William A. (1) Naval Dental Clinic, Naval Base	Norfolk, Va.
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Daniel, Robert Lee (3) P. O. Box 1133	Reidsville
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Derby, J. E. (1) (UL 6-8655).	Tryon
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Dolbee, Earl R., Jr. (1) 312 Commercial Bldg.	Hendersonville
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Dowdy, John H. (5) 418 Peachtree St.	Rocky Mount
Draughon, Donald R. (3) 703 Vickers Ave. (2-6591).	Durham
Draughon, Wallace R. (3) 703 Vickers Ave. (2-6591).	Durham
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Edwards, Henry A. (5).	Pink Hill
Edwards, James H. (4) 410 Professional Bldg. (TE 2-6356).	Raleigh
Edwards, J. R. (4) (67).	Fuquay Springs
Edwards, J. R., Jr. (4) (67).	Fuquay Springs
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Edwards, W. J. (3) Box 374 (SH 2-2919).	Siler City
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Eure, Darden J. (5) 707 Bridgers St. (6-4272).	Morehead City
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Ezzell, L. L. (1) (103).	Andrews

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Fields, Richard M. (3) Box 336	Pleasant Garden
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Finch, S. J. (4) Box 311 (3524)	Oxford
Finch, Walter H. (4) Box 862	Henderson
Finn, James C. (3) 1018 N. Elm St. (BR 4-7940)	Greensboro
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Fitzgerald, Paul, Jr. (4) 520 Professional Bldg. (TE 3-1351)	Raleigh
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Foust, James A., Jr. (3) (3-5774)	Mebane
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Fowler, William F. (2) Box 457 (4171)	King
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Fox, N. D. (2) 1656 Reynolda Road	Winston-Salem
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Freedland, J. B. (2) 724 Doctors Bldg., Kings Drive (FR 6-1651)	Charlotte 7
Freund, O. J. (2) 715 W. 4½ St.	Winston-Salem
Fritz, C. B. (1) Bernard Bldg. (DA 4-6928)	Hickory
Fritz, John R. (1) Bernard Bldg.	Hickory
Froneberger, H. D. (1) 155 S. York St. (UN 7-7321)	Gastonia
Frost, J. S. (3) 130 Union Ave.	Burlington
Frye, D. G., Jr. (1) 214 2nd St., N.W.	Hickory
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Furr, Curtis E. (2) Kannapolis Highway, Rt. No. 8.	Concord
Furr, James E. (5) 406 Murchison Bldg. (RO 2-7913)	Wilmington
Furr, Robert E. (5) 4677 S. 34th St.	Arlington 6, Va.
Furr, W. E. (1)	Franklin
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Galarde, A. J. (2) 1804 E. 4th St. (ED 2-5603)	Charlotte
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Garriott, Rosebud Morse (2) P. O. Box 68 (6-2551)	East Bend
Garris, Marcus A. (5) P. O. Box 186 (9-9551)	Weldon
Gaskins, Robert H., Jr. (5) 213 Canterbury Road (4049)	Jacksonville
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Gilbert, William B., Jr. (3) 309 Wachovia Bank Bldg. (2-2911)	Durham
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Gooding, Herbert W. (5) (3-831).....	Ayden
Goodwin, C. J. (1) 15 E. Jordan St. (TU 2-1521).....	Brevard
Graham, C. A. (3).....	Ramseur
Graham, C. Allen, Jr. (3) Moore Street (3751).....	Southport
Graham, Frank Richard (2) 1350 St. Julien St. (ED 4-4889).....	Charlotte 5
Graham, James E., Jr. (2) 1350 St. Julien St. (ED 4-2243).....	Charlotte 5
Graham, R. H. (1) Box 607 (PL 4-7881).....	Lenoir
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Grant, L. C., Jr. (5) (3911).....	Jackson
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Gray, W. H., Jr. (5) (Swift 2-2186).....	Williamston
Griffin, Lloyd E., Jr. (5).....	Elizabeth City
Griffin, Wallace S. (5) Citizens Bank Bldg.....	Edenton
Griffin, W. K. (3) 1004½ W. Main St. (5-3031).....	Durham
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Haltiwanger, William L., Jr. (3) 201 Deweese Ave. (TW 5-5515).....	Rockingham
Hamer, Thomas N. (2) 415 Professional Bldg. (ED 3-5811).....	Charlotte
Hamilton, A. L., Jr. (5).....	Morehead City
Hamilton, R. P. (4) (HO 7-2771).....	Cary
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Harrell, R. B. (2) Box 688.....	Elkin
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Harris, Guy V. (3) 501 Trust Bldg.....	Durham
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Harris, Stanford (1) (2311).....	Weaverville
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Hester, J. N. (3) Box 596	Reidsville
Hester, O. H. (3) Box 506	Norwood
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Hinson, Wade Allison (2) 505 Wallace Bldg. (ME 3-2491)	Salisbury
Hinson, William P., Jr. (3)	
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Hord, D. F., Jr. (1) Box 248 (332)	Kings Mountain
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Horton, R. L. (4) Box 746 (FO 5-9571)	Wendell
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Howell, James Baldwin (3) 915 N. Elm St.	Greensboro
Howell, J. Spencer (1) Box 255 (PO 5-2558)	Little Switzerland
Howell, W. C., Jr. (3) 106 Jones St. (4-0063)	Durham
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Hughes, Charles W. (3) (8-1801)	Roxboro
Hughes, Jack H. (3) (6791)	Roxboro
Hughes, John T. (3) Box 237 (Kingswood 2-4061)	Pittsboro
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Hull, P. C., Jr. (2) 601 Doctors Building (ED 3-9698)	Charlotte 7
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Hunt, Joseph T. (4)	Henderson
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Inscoe, A. G. (5) (446-1).....	Spring Hope
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Irwin, Wade Bryan (2) (276).....	Sparta
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Jarrett, Clyde H., Jr. (2)	
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Jewell, Edwin S. (5) 97 Lee Drive (RO 3-6003).....	Wilmington
Johnson, A. Dwight (5) National Bank Bldg.....	Wilson
Johnson, A. H. (3) 101 E. Washington St. (BR 2-6431).....	Greensboro
Johnson, B. McK. (5) Box 94 (8211).....	Wallace
Johnson, C. B. (5) (4156).....	Jacksonville
Johnson, Carol Hyde (3) 5 Rice St.....	Brevard
Johnson, Charles B. (5) P. O. Box 648.....	New Bern
Johnson, Joseph M. (4).....	Laurinburg
Johnson, Kenneth L. (4) 302 Land's Bldg. (TE 2-5145).....	Raleigh
Johnson, M. L. (4) P. O. Box 819 (2268).....	Whiteville
Johnson, Numa C., Jr. (3) 624 Quaker Lane.....	High Point
Johnson, William H. (3) (2-3631).....	Southern Pines
Johnson, W. H. (5) (5411).....	Plymouth
Johnston, Bennie McB. (3) 208 E. Harden St. (CA 6-6517).....	Graham
Johnston, C. D., Jr. (5) Box 231.....	Elizabeth City
Johnston, Charles M. (2)	
601 Sharon-Amity Road (ED 3-8739).....	Charlotte 7
Jones, B. E., Jr. (2) 57 N. Church St.....	Concord
Jones, E. D. (1) Box 254 (3261).....	West Jefferson
Jones, Marvin T., Jr. (4) (EL 4-3382).....	Apex
Jones, Paul E. (5) 502 S. Main St. (3565).....	Farmville
Jones, R. S. (4) (2491).....	Warrenton
Jones, William R. (3) S. 4th St. (LO 3-5774).....	Mebane
Jordan, J. F. (4).....	Raeford
Jordan, John J. (2) 1201 E. Morehead St. (ED 3-9283).....	Charlotte
Joyner, O. L. (2) P. O. Box 55 (4582).....	Kernersville
Kanoy, B. Ed (3) 1200 Broad St. (8-1642).....	Durham
Karesh, Harry A. (3) 219 Jefferson Bldg. (BR 2-6678).....	Greensboro
Keels, Cameron H., Jr. (1) Box 38 (HE 7-1720).....	Morganton

Keener, Harold (1) 474½ Haywood Road.....	Asheville
Keerans, James L. (2)	
810 Commercial Bank Bldg. (ED 2-1418).....	Charlotte
Keiger, C. C. (2) 712 Independence Building (ED 2-8731).....	Charlotte
Keith, H. Leonidas (5) 3600 Oleander Drive (RO 2-5133).....	Wilmington
Kendrick, Vaiden B. (2)	
822 Doctors Bldg., Kings Drive (FR 7-4588).....	Charlotte 7
Kendrick, Z. Vance, Jr. (2)	
Suite 502 Doctors Bldg., 1012 Kings Drive (ED 3-7826).....	Charlotte 7
Kennerly, Robert B. (1)	
609 Public Service Bldg. (AL 2-7751).....	Asheville
Ketcham, W. S. (5) (4455).....	Jacksonville
Kidd, William E. (5) Box 404.....	Washington
Kilkelly, T. F. (3) 303 Dixie Bldg. (BR 3-2121).....	Greensboro
Kilpatrick, J. M. (5) (2331).....	Robersonville
Kilpatrick, R. E. (3) 325 Sunset Ave.....	Asheboro
King, David D., Jr. (4) 314 N. Elm St. (RE 9-4171).....	Lumberton
King, James B., Jr. (3).....	Pittsboro
Kirk, F. W. (2) 200 Wallace Bldg.....	Salisbury
Kirk, W. S. (2) Box 525 (ME 3-1791).....	Salisbury
Kirkendol, E. C. (2) 1516 Central Ave. (EM 6-2578).....	Charlotte
Kirkland, G. F. (3) 913 Lamond Ave. (3-6551).....	Durham
Kiser, J. Donald (2) 1209 Liberty Life Bldg. (ED 2-4011).....	Charlotte
Kistler, A. R. (2) P. O. Box 314.....	Monroe
Kistler, C. D. (3) Box 575 (2538).....	Randleman
Kistler, Charles M. (4) 2015 Clark Ave. (TE 3-7979).....	Raleigh
Kitts, Warren H. (1) Box 86 (GI 6-6948).....	Hazelwood
Kluttz, Robert F. (2) (UL 7-5089).....	Landis
Kornegay, J. M., Jr. (5) (536).....	Warsaw
Kornegay, Thomas A. (3) Box 816 (3971).....	Troy
Krueger, George L. (2) 209 Professional Bldg. (ED 2-5917).....	Charlotte 2
Kyles, C. Paul (1) P. O. Box 126 (2521).....	Maiden
Lackey, A. A. (1) (Lawndale 2901).....	Fallston
Lamb, Lewis E., Jr. (4) 33rd Field Hosp., APO 11.....	New York, N. Y.
Lancaster, Charles G. (5) Box 427.....	Windsor
Large, Nelson D. (5) VA Hospital.....	Salisbury
Lasley, J. T. (3) 303 Jefferson Bldg. (BR 2-2634).....	Greensboro
Lauten, J. J. (3) 811 N. Elm St. (BR 2-5275).....	Greensboro
Lawrence, E. N. (4) 701 Professional Bldg. (TE 2-0784).....	Raleigh
Lawrence, Jack D. (1) Appalachian Theatre Bldg. (AM 4-3721).....	Boone
Lazenby, Glenn A., Jr. (2) 403 W. Broad St. (TR 3-3321).....	Statesville
Ledbetter, Charles B. (4)	
217 Bryan Bldg., Cameron Village (TE 2-5115).....	Raleigh
Lee, James Higley (5) 201 W. College St. (2372).....	Mount Olive
Lee, Lewis W. (5) 106 N. Tarboro St.....	Wilson
Lee, William G. (4) 312 S. 3rd St. (WE 4-2205).....	Smithfield
Leggette, James A., Jr. (3) 915 Lamond Ave. (2-4016).....	Durham
Lehmann, James H. (4) P. O. Box 1008 (4-0411).....	Sanford
Lentz, B. P. (2) 424 Professional Bldg. (FR 7-2980).....	Charlotte 2
Lessem, Robert B. (4) Box 949.....	Fayetteville
Levine, H. (2) 537 Nissen Bldg. (PA 4-5496).....	Winston-Salem
Lewis, James B. (1) 212 "D" West 2nd Ave. (UN 4-1263).....	Gastonia
Lewis, O. Preston (1) Box 146 (366).....	Kings Mountain
Libbey, Robert H. (2) 1524 Harding Place (ED 3-8369).....	Charlotte
Ligon, J. H., Jr. (4) 800 St. Mary's St. (TE 4-6463).....	Raleigh
Lilley, Melvin Mullen (5) P. O. Box 96 (378-1).....	Scotland Neck
Lindahl, R. L. (3) UNC School of Dentistry (8-3851).....	Chapel Hill
Lindsay, Dan A. (1) P. O. Box 257 (2601).....	West Jefferson 2
Lindsay, Kemp (4) 1st Citizens Bank Bldg.....	Fayetteville
Lineberger, Henry O., Jr. (4)	
804 Professional Bldg. (TE 2-5454).....	Raleigh
Linnville, Walter Smith, Jr. (5)	
Corner Pine & Green Sts. (5344).....	Wilson

Lipe, E. W. (2) 305 Professional Bldg. (5186)	Kannapolis
Lipscomb, C. T. (3) P. O. Box 325 (BR 2-2524)	Greensboro
Little, James Eugene (2) P. O. Box 733	Statesville
Little, T. A. (3) 2908 Roxboro Road (5-3555)	Durham
Litton, Robert B. (1) Box 1346	Shelby
Lockhart, David Kelly (3) 504 Wachovia Bank Bldg. (8-7131)	Durham
Lockwood, A. T. (1) 675 Biltmore Ave.	Asheville
Long, Herbert S. (3) P. O. Box 246	Graham
Long, John S. (2) 829 Nissen Bldg. (PA 5-0055)	Winston-Salem
Long, Robert (2)	Mocksville
Long, Robert E. (3) (3171)	Roxboro
Lore, John R. (3) 1018 N. Elm St. (BR 3-9919)	Greensboro
Love, James H. (1)	
102 ¹ / ₂ Broadway (NO 9-7276 Asheville Exchange)	Black Mountain
Lucas, Walter Joseph (1) (EX 9-3712)	Mount Holly
Lupton, Cecil Rhodes (3) UNC School of Dentistry (6551)	Chapel Hill
McAllister, J. Malcolm (4)	
303 Professional Bldg. (VA 8-5874)	Raleigh
McAnnally, C. W. (3)	Madison
McBrayer, W. F. (1) 1042 N. Washington (9120)	Rutherfordton
McCall, C. S. (1) (CH 5-2177)	Forest City
McCall, Clyde N. (1) Box 396 (GL 6-6327)	Stanley
McCall, C. W. (1) (UL 6-5005)	Tryon
McCall, R. S. (1) Box 527 (5291)	Marion
McClung, John A. (2) 401 Pepper Bldg. (PA 2-6324)	Winston-Salem
McCracken, Clayton H. (1) 807 Public Service Bldg.	Asheville
McDaniel, W. J. (1) (AT 7-4381)	Rutherfordton
McDowell, William W. (1) 126 2nd Ave., N. E.	Hickory
McDuffie, A. A. (3) P. O. Box 215 (3266)	Candor
McFall, Walter T. (1) 23 White Oak Road	Asheville
McFall, Walter T., Jr. (3)	
UNC School of Dentistry (8-8691)	Chapel Hill
McFarland, Wilbur G., Jr. (3)	
272 N. Graham-Hopedale Road (CA 6-3278)	Burlington
McGuire, Alice Patsy (1) (64-J)	Sylva
McGuire, Daisy (1) (64-R)	Sylva
McGuire, Harold S. (1) (64-J)	Sylva
McGuire, W. P. (1) (64-R)	Sylva
McIntosh, James A. (3) 138 Scarboro St.	Asheboro
McKaughan, Gates (4) P. O. Box 878 (RE 9-5924)	Lumberton
McKaughan, W. R. (3) 330 Locke	High Point
McKay, S. R. (4)	Lillington
McKenzie, Owen Ray (3) Box 1245	Burlington
McLean, Graham (4)	Lumberton
McLeod, William H. (2)	
Suite 204, Secrest Bldg. (AT 3-2343)	Monroe
McRae, Walter L. (4) Box 588 (2101)	Red Springs
Mackie, E. B. (1) (6125)	Granite Falls
Maddox, James H. (1) Box 33 (AL 4-3586)	Enka
Mallard, A. R. (5) 1018 E. Ash St.	Goldsboro
Marks, Sandy C. (5)	
APCM Lubondai, Tshimbulu	Congo Belge, Africa
Marshall, W. Penn (4) Professional Bldg. (TE 2-6327)	Raleigh
Marshbanks, B. P., Jr. (4) (4486)	Lillington
Marshburn, J. A. (4) State Hospital	Butner
Martin, Ernest L. (2) Box 495	Statesville
Martin, F. E. (1) (MOhawk 7-1226)	Enka
Martin, William T. (4) 303 Professional Bldg. (TE 2-4314)	Raleigh
Massey, L. M. (4) Box 176 (AN 9-4281)	Zebulon
Massey, M. B. (5) Box 428 (2037)	Greenville
Massey, S. H., Jr. (4) P. O. Box 157 (544-1)	Warrenton

Massey, W. J., Jr. (4) (3277)	Smithfield
Massey, Zyba K. (4) Box 252 (AN 9-3221)	Zebulon
Masten, Guy M. (2) 714 Nissen Bldg	Winston-Salem
Masten, R. E. (2) 335 Nissen Bldg	Winston-Salem
Masters, David B. (4) 200 St. Mary's St. (TE 2-5361)	Raleigh
Masters, W. B. (1) (2681)	Bakersville
Matheson, William M. (1) 517 Grand Boulevard	Boone
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May, H. M. (1) 205 Flatiron Bldg. (AL 2-8061)	Asheville
Mazitis, Erika Kalnins (1)	
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Meadows, Kenneth H. (2) 1701 Grace St. (PA 3-6558)	Winston-Salem
Medford, N. M. (1) Box 156	Waynesville
Medford, Phil McRae (1) (GLendale 6-3911)	Waynesville
Medlin, E. M. (3) Box 176 (4-1515)	Aberdeen
Meggins, L. P., Jr. (3) 146 Church St.	High Point
Melvin, R. Philip (2) 2035 Beach St.	Winston-Salem
Mendenhall, F. C. (2) 214 Nissen Bldg. (PA 2-1534)	Winston-Salem
Menius, John W. (3) Box 144 (2044)	Asheboro
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Miller, C. I. (3) Box 748 (YU 2-2912)	Albemarle
Miller, Roy A. (5) 410 Middle St.	New Bern
Miller, W. J. (1) Hedrick Bldg. (PL 4-7841)	Lenoir
Milliken, J. B. (3) P. O. Box 71	Siler City
Minges, C. E. (5) Box 192	Rocky Mount
Minges, C. R. (5) Box 192 (6-6026)	Rocky Mount
Miska, M. G. (3) Rt. 1 (KI 2-2868)	Pittsboro
Mitchell, David L. (3) 32 Rogerson Drive (9-5367)	Chapel Hill
Mize, John T. (1) Box 308 (UL 2-2335)	Tryon
Mohn, R. L. (4) 2506 Mirror Lake Drive (HE 3-3665)	Fayetteville
Monk, H. L., Jr. (3)	
401 Depositors National Bank Bldg. (5-2141)	Durham
Montgomery, D. O. (2) P. O. Box 309 (TR 3-4541)	Statesville
Moore, E. D. (2) 921 Elizabeth Ave. (ED 3-2675)	Charlotte
Moore, H. W. (3) P. O. Box 373 (3664)	Hillsboro
Moore, J. G. (2) 154 N. Main St.	Mooresville
Moore, J. S. (3) Box 150	Reidsville
Moore, L. J. (4) (2666)	St. Pauls
Moore, L. J., Jr. (4) Box 998	Lumberton
Moore, R. T. (1) (VA 7-4221)	Mount Holly
Moore, R. W. (5) P. O. Box 721 (3971)	Tarboro
Moore, Saunders W. (3) 1804 W. Front St. (CA 6-8861)	Burlington
Moore, Walter H. (3) Box 148	Reidsville
Moorefield, Paul (2) P. O. Box 311	Mount Airy
Moreland, Jessie Zachary (1) P. O. Box 153 (3575)	Highlands
Morgan, Eugene Brown (2) P. O. Box 794	Kannapolis
Morris, Donald W. (2) 1519 Elizabeth Ave. (ED 3-9854)	Charlotte
Morris, Ernest C. (2) 1519 Elizabeth Ave. (ED 4-3614)	Charlotte
Morrison, B. R. (5) Box 363	Wilmington
Morrison, Robert R., Jr. (4)	
611 Professional Bldg. (TE 4-3346)	Raleigh
Moser, J. E. (1) Box 1123	Gastonia
Moser, Kenneth B. (2) 238 Nissen Bldg. (PA 5-7741)	Winston-Salem
Moser, S. E. (1) Box 1123 (UN 5-1370)	Gastonia
Moses, John E. (2)	
1400 N. Independence Boulevard (FR 6-4030)	Charlotte 5
Moses, Joseph M. (1) 25 Myrtle St. (TA 5-8652)	Belmont
Motley, Elliott R. (2) 217 N. Torrence St.	Charlotte
Mundy, Carl R. (1) 1055½ Haywood Road (AL 4-4226)	W. Asheville

Munsell, Paul (5).....	Kinston
Murphrey, Willis E., Jr. (5).....	Roanoke Rapids
Murray, Henry V. (3) Box 98 (CA 6-1723).....	Burlington
Murray, Henry V., Jr. (3) Box 98 (CA 6-4841).....	Burlington
Mustian, W. F. (5) Box 113 (2206).....	Kill Devil Hills
Mynatt, William A. (1)	
4 McGeachy Bldg., Biltmore Plaza (AL 4-2531).....	Asheville
Neal, W. E. (3) (106).....	Liberty
Nelson, J. Sterling D. (4) 202 Land's Bldg. (TE 2-6584).....	Raleigh
Nelson, R. M. (3) UNC School of Dentistry (9-9201).....	Chapel Hill
Nelson, T. E., Jr. (4) 200 St. Mary's St. (TE 2-5361).....	Raleigh
Newman, Joseph Bridger (3) P. O. Box 196 (CA 6-2271).....	Burlington
Newton, M. E. (3) Box 856.....	Chapel Hill
Nicholson, J. H. (2) Box 89.....	Statesville
Nicholson, M. P., Jr. (4) 212 Bryan Bldg. (TE 2-5027).....	Raleigh
Nisbet, Thomas G. (2)	
324 Doctors Bldg., Kings Drive (FR 6-6493).....	Charlotte 7
Nissen, Eva Carter (2) 633 Nissen Bldg.....	Winston-Salem
Nixon, H. E. (5) Box 504.....	Elizabeth City
Noblitt, P. M. (1)	
121 Ferson Loop, Lackland Air Force Base.....	San Antonio, Texas
O'Berry, Walter S. (5) Box 166 (2314).....	Tarawa Terrace
Oldham, Floy T., Jr. (1)	
Box 100, State Hospital (HE 7-0221, Ext. 281).....	Morganton
O'Leary, Joseph A. (1) Box 235.....	Spray
Olive, C. S. (4) 217 Green St.....	Fayetteville
Olive, R. M. (4) 217 Green St.....	Fayetteville
Olive, R. M., Jr. (4) 211 Devane St.....	Fayetteville
Oliver, Otis (2) P. O. Box 784.....	Mount Airy
Oliver, William H. (4) P. O. Box 29 (3900).....	Smithfield
Osborne, C. P., Jr. (4) Medical Arts Bldg. (RE 9-6069).....	Lumberton
Overcash, R. F. (3) Box 867 (YU 2-5811).....	Albemarle
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Owen, Olin Watson (2) 1201 East Morehead St. (ED 3-9283).....	Charlotte
Page, L. G. (3) P. O. Box 157 (4333).....	Yanceyville
Paisley, R. L. (1) Box 782.....	Morganton
Parker, C. A. (1) Box 305 (6742).....	Marion
Parker, Henry C. (2)	
Suite 1301-5 Liberty Life Bldg. (ED 2-3595).....	Charlotte
Parker, W. H. (1) Box 2.....	Valdese
Parks, J. H. (2) 209 Professional Bldg.....	Kannapolis
Paschal, Lawrence H. (4) 805 First Citizens Bank Bldg.....	Fayetteville
Patterson, C. E. (3) 2007 Walker Ave. (BR 5-2271).....	Greensboro
Patterson, George G. (3) 207 Maple Ave.....	Burlington
Patterson, George K. (1) 617 Flatiron Bldg.....	Asheville
Patterson, R. M. (2) P. O. Box 544.....	Concord
Paulson, Ruta B. (3) 823 Louise Circle (6716).....	Durham
Payne, J. M. (4) Box 222 (WA 2-6427).....	Clayton
Pearce, J. A. (4) 2011 Clark Ave. (TE 4-1432).....	Raleigh
Pearce, O. R., Jr. (5) Box 439 (7149).....	Greenville
Pearce, W. M. (3) (1539).....	Hamlet
Pearson, E. A., Jr. (4) 2718 Fairview Road (TE 3-6851).....	Raleigh
Pearson, Paul L. (4) Olive Chapel Road (ELgin 4-4201).....	Apex
Peck, Robert B. (2) USS H. W. Gilmore AS-16, FPO.....	New York N. Y.
Peeler, L. B. (2)	
606 Doctors Bldg., 1012 Kings Drive (FR 7-2604).....	Charlotte 7
Peery, W. Stewart (2) 225 N. Torrence St. (ED 3-4624).....	Charlotte
Pegg, Fred N. (2) P. O. Box 204.....	Kernersville
Pennell, William T. (1) 705 Flatiron Bldg. (AL 3-8904).....	Asheville

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Perry, T. Edwin (4)	
202 Bryan Bldg., Cameron Village (TE 2-1654)	Raleigh
Petersen, Sidney D., Jr. (2) 502 Doctors Bldg. (ED 2-2283)	Charlotte 7
Petree, R. E. (2) 418 Professional Bldg. (ED 2-1578)	Charlotte
Pharr, John R. (2) 824 Doctors Bldg.	Charlotte
Phillips, A. A. (4) 611 Professional Bldg. (TE 3-6141)	Raleigh
Phillips, Guy McDonald (2)	
281 Canterbury Trail (PA 5-5808)	Winston-Salem
Pigford, Guy E. (5) 611 Murchison Bldg.	Wilmington
Pike, John Sanders (3) 48 Hayes Road (8-0373)	Chapel Hill
Pitts, D. R. (3) Rt. 1, Box 322	Jamestown
Plaster, Harold Edwin (1) Box 1051	Shelby
Plaster, Hubert S. (1) P. O. Box 216	Shelby
Pleasants, Marvin (4) P. O. Box 276 (5486)	Louisburg
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Pless, Cecil A., Jr. (1) 801 Flatiron Bldg.	Asheville
Poindexter, C. C. (3) P. O. Box 1265 (BR 2-3224)	Greensboro
Poindexter, Claiborne W. (3) Box 1265 (BR 4-5392)	Greensboro
Poole, S. D. (5) Box 203 (534)	Goldsboro
Poovey, Auburn L. (1) Bernard Bldg.	Hickory
Pope, E. F. (1)	Hendersonville
Powell, C. G. (5)	Aboskie
Powell, J. B. (4) P. O. Box 756	Clinton
Powell, William H. (1) Hair Bldg., Park St. (AL 3-6263)	Canton
Pratt, F. P. (2) P. O. Box 405	Salisbury
Presnell, O. L. (3) 202 Hedrick Bldg. (3157)	Asheboro
Pressly, W. A. (3) 822 N. Elm St. (BR 2-3318)	Greensboro
Price, A. D. (3)	
208 Lennox Bldg., Glen Lennox Shopping Center (7-4691)	Chapel Hill
Price, J. L., Jr. (1) 102 8th Ave., N. W.	Hickory
Price, William H. (2) P. O. Box 262 (AT 3-6721)	Monroe
Pridgen, D. L. (4) 115 Bow St. (HE 2-4344)	Fayetteville
Pringle, A. J. (2) 305 Jefferson Bldg. (BR 3-1472)	Greensboro
Pringle, J. M. (4) 907 Hay St. (HE 2-4395)	Fayetteville
Pruett, J. E. (1) MAIn 9-2761	Bessemer City
Pruett, Lewis D. (2) P. O. Box 46	Elkin
Prugh, John Lawrence (4) State Hospital	Butner
Pruitt, Charles Conley, Jr. (4)	
Dental Dept., U. S. Marine Corps Air Station (4013)	Cherry Point
Pruitt, James F. (4) 307 Main St.	Oxford
Purvis, P. C. (4) 304 Iona St. (MA 8-7166)	Fairmont
Quinn, Galen W. (3) 806 E. Forest Hills Blvd. (9222)	Durham
Ralls, Marion L., Jr. (3) 912 N. Elm St. (BR 3-9125)	Greensboro
Ralph, W. T. (5)	Belhaven
Ramsey, Arthur M. (1) P. O. Box 306 (2221)	Marshall
Rankin, W. W. (4) 406 Professional Bldg. (TE 2-8575)	Raleigh
Ransom, Robert K. (1)	Burnsville
Rasberry, W. E. (5) (283-1)	Grifton
Ratton, Thomas Guy (2) Box 163	Lexington
Ray, Kenneth M. (1) 569 Merrimon Ave. (AL 2-7305)	Asheville
Raymer, J. L. (1) P. O. Box 1297	Shelby
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Reece, John F. (1) P. O. Box 816 (PL 4-7881)	Lenoir
Reece, J. P. (2) Cannon Bldg. (STate 2-4514)	Concord
Reese, Gene L. (1) Box 271	Boone
Reeves, Horace P., Jr. (2)	
225 N. Torrence St. (ED 4-9122)	Charlotte
Reeves, James D. (1)	
Hendersonville Highway (ARden 6162)	Fletcher
Rehm, J. G. (2) 1012 Kings Drive (ED 4-1279)	Charlotte 7

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Reid, Curtis S. (2) 703 Nissen Bldg.	Winston-Salem
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Rhea, R. C. (1) Box 366	Canton
Rhyne, Howard S. (1) 211 W. Main Ave. (UN 5-2041)	Gastonia
Rich, C. F. (1) 812 Flatiron Bldg. (AL 3-3742)	Asheville
Richardson, Maurice B. (3) North First St. (YU 2-3744)	Albemarle
Richardson, R. E. (3) 403 Westwood Drive (8-5781)	Chapel Hill
Riddick, C. R. (5)	Ayden
Riddle, Arthur C., Jr. (1) 435 Biltmore Ave. (AL 4-2958)	Asheville
Ridenhour, C. E. (2) Carolina Bldg.	Kannapolis
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Roberts, C. E. (4) (4746)	Dunn
Roberts, J. Ernest (3) Medical Village (6-6812)	Burlington
Roberts, Pearce, Jr. (1)	
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Ross, Grady L. (2) 1908 E. 7th St. (ED 2-8720)	Charlotte 7
Ross, Heywood (2) 505 Liberty Life Bldg. (ED 4-4779)	Charlotte
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Ross, Norman F. (3) Box 3806, Duke Hospital (9011)	Durham
Ross, Thurman J. (3) 910 Green St. (8-1110)	Durham
Rowe, Oehmig Daniel (1) Box 834	Marion
Rudder, William L. (5) Box 28 (2-5706)	Beaufort
Russ, Bobby M. (5) 413 Murchison Bldg.	Wilmington
Russell, L. T. (1) 409 Doctors Bldg. (AL 2-5851)	Asheville
Ryon, W. Eugene, III (1) 4 Vermont Ave. (AL 3-3971)	Asheville
Sager, Robert Henry (3)	
UNC School of Dentistry (8-3561)	Chapel Hill
Sain, H. T. (1) P. O. Box 736	Morganton
Sams, Roy B. (1) Box 372	Mars Hill
Sanders, Cleon W. (4) (266-1)	Benson
Sapp, Baxter B., Jr. (3) Box 3806, Duke Hospital (9011)	Durham
Sappington, Roy R., Jr. (4) 1406 General Lee Ave.	Fayetteville
Saunders, W. L. (3) 1011 Madison Ave.	Greensboro
Scherer, Richard F. (2) 704 Nissen Bldg.	Winston-Salem
Schiebel, E. C. (2) Box 664	Elkin
Schmucker, Ralph (2) 801 Liberty Life Bldg. (ED 2-3468)	Charlotte
Schneider, J. J. (1) DC USN, MOQ 2206	Camp Lejeune
Scott, Glenn G. (3) (MA 3-6512)	Leaksville
Scott, Ludwig G. (3) Scott Clinic, Rt. No. 2	Burlington
Scruggs, W. N. (2) 402 Wilder Bldg. (ED 2-4994)	Charlotte
Secrest, W. A. (2) 208 O'Hanlon Bldg.	Winston-Salem
Seifert, D. W., Jr. (4) 804 Professional Bldg. (TE 3-3011)	Raleigh
Seitter, D. B., Jr. (5) 907 Murchison Bldg.	Wilmington
Self, Fred L. (1) (RE 5-5606)	Lincolnton
Self, Isaac R. (1) Box 127 (RE 5-5128)	Lincolnton
Self, Isaac Ruffin, Jr. (1) P. O. Box 127	Lincolnton
Senter, J. C. (3) Box 911 (YU 2-2327)	Albemarle
Sessoms, W. W. (3) 904-5 Southeastern Bldg. (BR 4-8386)	Greensboro
Shaffer, S. W. (3) 421-4 Southeastern Bldg. (BR 2-4022)	Greensboro
Shankle, Robert J. (3) UNC School of Dentistry	Chapel Hill
Shapiro, Eugene N. (1) 48 Battery Park Ave. (AL 2-2831)	Asheville
Shaw, Frederick C. (1) 328 E. Harper Ave. (PL 4-6164)	Lenoir
Sheffield, Neal (3) 304 Dixie Bldg. (BR 2-5524)	Greensboro
Sheffield, Neal, Jr. (3) 902 N. Elm St. (BR 4-9998)	Greensboro
Sherman, Clarendon F. (2) P. O. Box 325 (2121)	Granite Quarry

Sherrill, Claude A., Jr. (1)	
Medical-Dental Bldg. (AL 3-9900)	Asheville
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Shoaf, R. R. (2) Box 542	Lexington
Sholar, Norman P. (2) P. O. Box 180 (2-2441)	Mooreville
Short, L. H. (2) 1012 Kings Drive (FR 6-7719)	Charlotte 7
Sigmon, James W. (3) 1601 Cornwallis Drive (BR 3-9182)	Greensboro
Sikes, T. E. (3) 916 Southeastern Bldg. (BR 2-8951)	Greensboro
Sikes, T. E., Jr. (3) 1100 Olive St. (BR 3-0081)	Greensboro
Silvers, Jack Everette (5) 506 Evans St. (PL 2-5751)	Greenville
Slaughter, F. C. (2) Professional Bldg.	Kannapolis
Sloop, W. M. (1) Box 258 (RE 3-4728)	Crossnore
Slott, E. F. (3) Medical Village, Vaughn Road (5-8159)	Burlington
Sluder, Troy B., Jr. (3) Route No. 3 (8-5781)	Chapel Hill
Smith, Amos H. (2) Box 242 (CH 6-2404)	Lexington
Smith, A. L., Jr. (4) 222 E. Main St. (3-2933)	Sanford
Smith, Everett L. (4) 820 Professional Bldg. (TE 2-0473)	Raleigh
Smith, Grover W. (5) Kinston Clinic	Kinston
Smith, James H. (5) 703 Murchison Bldg.	Wilmington
Smith, Junius C. (5) 502 Murchison Bldg.	Wilmington
Smith, M. F. (4) Box 206	Rowland
Smith, Marcus R. (4) (500)	Raeford
Smith, Newton (4) 1900 Bragg Blvd.	Fayetteville
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Smith, Thomas A. (2)	
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Snyder, J. M. (1)	Old Fort
Sockwell, C. L. (3) UNC School of Dentistry (9-5450)	Chapel Hill
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Southard, F. J. (2) Pinnix Bldg.	Kernersville
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Sowers, Wade A. (2) Box 406 (CH 6-5241)	Lexington
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Spence, W. M. (5) 215 Carolina Bldg.	Elizabeth City
Spencer, John R. (2) 820 W. Henderson St. (ME 3-9536)	Salisbury
Spillman, J. H. (2) 2008 Cloverdale	Winston-Salem
Spoon, Riley E., Jr. (2) Professional Bldg. (PA 3-0777)	Winston-Salem
Stanford, A. R. (3) 404 Guilford Bank Bldg. (BR 2-0246)	Greensboro
Stanley, Lloyd B. (4) 2801 Anderson Drive (TE 6-6463)	Raleigh
Stealy, S. L., Jr. (4) Box 868	Fairbanks, Alaska
Steelman, S. H. (1) P. O. Box 308 (RE 5-7476)	Lincolnton
Stephens, J. A. (3) Box 768	Burlington
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Stevens, C. W. (4)	
Division of Oral Hygiene, State Board of Health	Raleigh
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Stone, I. F. (2) (EM 8-2638)	Pilot Mountain
Stonestreet, Frank M. (3) 255 N. 2nd St. (YU 2-5012)	Albemarle
Stowe, Grover C., Jr. (2)	
301-A Hawthorne Lane (ED 3-9063)	Charlotte 4
Strange, Charles G., Jr. (3)	
Dental Detachment, MCS (TR 5-5203)	Quantico, Va.
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Strupe, James G. (2) 317 Nissen Bldg. (PA 5-4817)	Winston-Salem
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Sturdevant, C. M. (3) UNC School of Dentistry (8-2841)	Chapel Hill

- Sturdevant, R. E. (3) UNC School of Dentistry (9-2021).....Chapel Hill
 Sugg, C. H. (3) Ridge St. (ME 5-3764).....Draper
 Sugg, Robert W. (3) 516 Trust Building (2-3363).....Durham
 Suggs, Joseph R. (3) Professional Bldg., 157 McArthur St.....Asheboro
 Swaim, John (3) 231 S. Fayetteville St.....Asheboro
 Swain, John P., Jr. (4) Professional Bldg. (TE 4-2197).....Raleigh
 Swindell, James E. (4) Professional Bldg. (TE 3-3706).....Raleigh
- Tannenbaum, Arthur R. (3) 1001 N. Elm St. (BR 2-7800).....Greensboro
 Tatum, Edis W. (5).....Mount Olive
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 Taylor, Kenneth, Jr. (1) 111 W. 3rd Ave. (UN 4-3511).....Gastonia
 Taylor, Lois E. (2) 720 East Boulevard (ED 3-4807).....Charlotte
 Taylor, Omer W. (1) 558 Fleming St.....Hendersonville
 Taylor, Preston R. (1) Box 108 (TA 5-2635).....Belmont
 Taylor, Robert G., Jr. (2) Box 586.....North Wilkesboro
 Taylor, W. C. (2) Box 1429.....Salisbury
- Teague, Charles H. (3) 716 Southeastern Bldg. (BR 2-3934).....Greensboro
 Teague, Everette R. (3) Box 659 (DI 9-3531).....Reidsville
 Templeton, William B. (2) 1313 Liberty Life Bldg. (FR 7-4000).....Charlotte
- Tew, J. J. (4).....Clayton
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 Thomas, Carl L. (2) P. O. Box 663.....Mount Airy
 Thomas, J. E. L. (1) VA Hospital, Swannanoa Division.....Oteen
 Thomas, J. T., Jr. (3) 151 N. Fayetteville St.....Asheboro
 Thompson, H. W. (2) (UL 7-7497).....China Grove
 Thompson, Horace K. (5) 3500 Oleander Drive (5133).....Wilmington
 Thompson, Lee Roy (2) 801 O'Hanlon Bldg.....Winston-Salem
 Thorpe, J. O. (2) Suite A-2101 N. Independence Boulevard (ED 3-0690).....Charlotte
- Thurston, Milton S. (2) P. O. Box 1216 (ME 3-1762).....Salisbury
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 Tomlinson, F. N. (2) 310 O'Hanlon Bldg. (PA 2-7326).....Winston-Salem
 Tomlinson, R. L. (5) 1st National Bank Bldg.....Wilson
 Towler, S. B. (4) 801 Professional Bldg. (TE 2-0926).....Raleigh
 Townsend, G. L. (4) Box 469.....Dunn
 Townsend, M. F. (4) Box 1053.....Lumberton
 Trivette, L. P. (2) Box 574 (3-4331).....Mooresville
 Troutman, M. L. (2) P. O. Box 751.....Kannapolis
 Truluck, Moultrie H. (1) P. O. Box 5294 (AL 3-9846).....Asheville
 Tucker, W. W. (5) Room 108, Purser Bldg.....Goldsboro
 Turbyfill, W. J. (1) 302 Flatiron Bldg.....Asheville
 Turlington, R. H. (4) Henry Vann Bldg. (3613).....Clinton
 Turner, James L. (2) P. O. Box 717 (6661).....Kernersville
 Turner, J. V. (5) P. O. Box 1426 (3387).....Wilson
 Turner, L. R. (5) Box D (4455).....Jacksonville
 Turner, R. S. (3) 811 N. Elm St. (BR 2-6432).....Greensboro
- Umphlett, W. W., Jr. (5) 507 Nash St.....Wilson
 Underwood, F. H. (3) Box 98 (2811).....Carthage
 Underwood, J. T. (3) 2829 Chapel Hill Road (7-9011).....Durham
 Underwood, Nash H. (4) 814 S. Main St. (2536).....Wake Forest
 Underwood, R. L. (3) 410 Guilford Bldg.....Greensboro
- Vander Voort, C. R. (3) 107 N. Poplar St. (WI 4-1515).....Aberdeen
 Voils, C. U. (2) P. O. Box 240.....Mooresville
 Vollmer, T. D. (3) 1610 Vaughn Road, Medical Village, Suite J (6-2525).....Burlington

Waddell, M. A. (4)	Fair Bluff
Wadsworth, Charles H. (2) 180 N. Union St.	Concord
Walker, B. N. (2) 301 Hawthorne Lane (ED 3-9063)	Charlotte
Walker, Curley G. (1) 252 Charlotte St.	Asheville
Walker, F. H. (2) (2181)	Yadkinville
Walker, M. E. (3) 1431 Broad St. (8-9791)	Durham
Walker, Woodrow W. (2) 621 Doctors Bldg., Kings Drive	Charlotte 7
Wall, L. E. (2) 706 Independence Building (ED 3-8087)	Charlotte 2
Wallace, Mitchell W. (4)	Elizabethtown
Waller, D. T. (2) 301 Hawthorne Lane (ED 2-1223)	Charlotte
Walters, Percy F. (2) P. O. Box 251 (AT 3-2998)	Monroe
Ward, E. Ben (4) 511 S. Franklin St. (MI 2-3754)	Whiteville
Ward, James A. (5)	Roanoke Rapids
Ware, William G., Jr. (3) 501 Nissen Bldg.	Winston-Salem
Warlick, R. B. (3) Box 331 (OX 5-3522)	Southern Pines
Warren, E. R. (5) Box 845	Goldsboro
Warren, Ray Alexander (1) 330 S. Grove St. (5-2740)	Lincolnton
Watson, Robert Hugh (2)	
301-C Hawthorne Lane (ED 2-1223)	Charlotte
Waynick, George E., Jr. (2) 731 Nissen Bldg.	Winston-Salem
Waynick, I. M. (2) 731 Nissen Bldg.	Winston-Salem
Weant, T. Franklin (2)	Spencer
Weathersbee, Ramsey (5) Box 602	Wilmington
Weathersbee, Ramsey, Jr. (5) Box 602	Wilmington
Weaver, R. C. (1) 303 Flatiron Bldg. (AL 2-3187)	Asheville
Webster, B. H. (2) 1112 Liberty Life Bldg. (ED 2-1337)	Charlotte
Webster, Frank T. (3) P. O. Box 168 (754)	Madison
Weeks, H. E. (5) (4344)	Tarboro
Weeks, William P. (2) 122 Pennsylvania Ave.	Winston-Salem
Wehunt, Lloyd Dixon (1) Box 25	Valdese
Wells, C. T. (1) Wells Bldg.	Canton
Wells, C. T., Jr. (1) Wells Bldg.	Canton
Wells, DeLeon, Jr. (5)	Wallace
Westrick, Charles M. (2) 2240 Cloverdale Ave.	Winston-Salem
Wharton, Richard G. (2) Box 422 (ME 3-0461)	Salisbury
Wheeler, C. D. (2) 500 Wallace Bldg.	Salisbury
Wheeler, Charles M. (3) 117 N. Cedar St. (BR 2-4842)	Greensboro
Wheless, J. R. (3) P. O. Box 636	Reidsville
Whicker, T. A. (2) P. O. Box 767	Thomasville
Whisnant, C. M. (1) (11)	Burnsville
Whisnant, J. F. (1) Box 347 (ME 1-2171)	Spindale
White, T. L. (2) (103)	North Wilkesboro
Whitehead, A. P. (5) Box 1303	Rocky Mount
Whitehead, J. W. (4) Box 465	Smithfield
Whitehurst, Raymond C., Jr. (5) 1010 W. Nash St.	Wilson
Whitehurst, R. L. (5) Box 207	Rocky Mount
Whitson, W. K. (1) P. O. Box 7125 (AL 2-6071)	Asheville
Whittington, P. B., Jr. (3)	
228 Medical Arts Bldg. (BR 2-7875)	Greensboro
Wiggs, William J. (4) 2704 Fort Bragg Road (HU 4-7454)	Fayetteville
Wilkins, Ralph A. (3) Box 828 (6-0918)	Burlington
Wilkins, R. A. (5) Box 227 (2341)	Mount Olive
Williams, Carolyn T. (2) Box 46	North Wilkesboro
Williams E. P. (4) 408 Hawthorne Medical Center	Charlotte
Williams, Harry R. (4) (2216)	Roseboro
Williams, Henry T. (1) Room 18, Hollar Bldg.	Hickory
Williams, Jabez Herring, Jr. (1) Box 866 (7668)	Thomasville
Williams, James Lowell (3) Box 217	Pittsboro
Williams, John R. (2) 637 Nissen Bldg. (PA 5-5517)	Winston-Salem
Williams, Joel Sherrod (2) 120 S. Tradd St. (TR 3-3281)	Statesville
Williams, R. E. (5) 210 N. Herman St.	Goldsboro
Williamson, B. W., Jr. (3) (1573)	Hamlet
Williamson, J. F. (3)	Wadesboro

Willis, Guy R. (3) 910 111 Corcoran St. Bldg. (2-8280)	Durham
Wilson, F. M. (2) 101 S. Hayne St. (AT 3-3312)	Monroe
Wilson, G. Curtis (5) 1800 Anderson St. (5271)	Wilson
Wilson, Noracella E. McGuire (1)	Sylva
Wilson, Roy W. (2) 818 Professional Bldg.	Charlotte
Winchester, P. W. (1) Box 628	Morganton
Withers, R. M. (2)	Davidson
Wolfe, C. B. (3) 153 Bishop St. (BR 2-4595)	Greensboro
Woltz, William Lee, Jr. (4) Box 257 (3-4571)	Sanford
Wood, Matthew T. (3) UNC School of Dentistry (9-6361)	Chapel Hill
Woodall, D. C. (4) Box 437 (2853)	Erwin
Woodard, W. L. (5)	Beaufort
Woody, F. Spencer (3) (5901)	Roxboro
Woody, J. L. (1) Box 335 (3725)	Bryson City
Woody, L. W. (1) P. O. Box 36 (POplar 5-4161)	Spruce Pine
Woody, L. W., Jr. (1) (PO 5-4161)	Spruce Pine
Woody, M. E., Jr. (1) 318 South St. (UN 5-0490)	Gastonia
Woody, W. L. (1) 318 South St. (UN 5-0490)	Gastonia
Wooten, A. L. (5) National Bank Bldg.	Wilson
Wooten, C. L. (4) P. O. Box 563 (3353)	Whiteville
Wooten, George A. (5) Box 163	Snow Hill
Wright, Dan (5) Box 546 (3745)	Greenville
Wright, E. K., Jr. (5) Box 48 (2041)	Williamston

Yates, P. P. (1) Hedrick Bldg. (PL 4-3674)	Lenoir
Yates, Robert A. (4) Box 265 (4761)	Chadbourn
Yelton, John L. (1) Box 35	Shelby
Yelton, William D. (1) P. O. Box 795	Hickory
Yelton, W. F. (2) 531 Nissen Bldg. (PA 2-6662)	Winston-Salem
Yelverton, Hugh (5) Box 984	Wilson
Yokeley, Gilbert W. (2) O'Hanlon Bldg.	Winston-Salem
Yokeley, K. M. (2) 767 Oaklawn Ave.	Winston-Salem
Young, D. C., Jr. (2) Medical Arts Bldg.	Salisbury
Young, Douglas (2) AO 3088899, Box 63, USAF Hospital, Wiesbaden, APO 633	New York N. Y.
Young, H. L. (5) 119 N. Church St.	Rocky Mount
Young, T. L. (4) 920 W. Johnson St. (TE 2-5618)	Raleigh
Young, W. H. (5) (76)	Burgaw
Young, W. Kenneth (3) 153 Bishop St. (BR 4-5928)	Greensboro

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Zealy, James M. (5) Box 200	Goldsboro
Zibelin, C. V. (5) Box 407 (4536)	Wallace
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Zimmerman, L. H. (3) 164 S. Main St.	High Point
Zimmerman, Lee Roy (3) 164 S. Main St.	High Point
Zimmerman, Thomas R. (3) 164 S. Main St.	High Point

RETIRED MEMBERS

August 1, 1959

Edwards, E. L. (1) 207 S. King St.	Morganton
Nance, A. W. (4)	Point Harbor

NORTH CAROLINA DENTAL ASSISTANTS'
ASSOCIATION OFFICERS-1959-60

President: Bess Reed, 1407 Reynolds Bldg.....Winston-Salem
 President-Elect: Calyle Cromwell, 208 N. 12th St., Apt.-A.....Wilmington
 Vice President: Myrl Blackwell, 522 East South Ave.....Draper
 Secretary: Janie Brown, 2023 Walnut St.....Durham
 Assistant Secretary: Rebecca Ritchie, P. O. Box 348.....Statesville
 Treasurer: Mary Nell Inman, Route No. 2.....Mount Airy

NORTH CAROLINA DENTAL AUXILIARY
OFFICERS — 1959-60

President: Mrs. E. U. Austin, 2018 Radcliff Ave.....Charlotte
 President-Elect: Mrs. Estes Butler, 2022 Pembroke Road.....Greensboro
 Vice President: Mrs. Clyde Young, Jr.,
 1101 Round Knot Ave., Forest Hills.....Salisbury
 Treasurer: Mrs. Frank H. Walker.....Yadkinville
 Corresponding Secretary: Mrs. Ralph Campbell
 1050 Bolling Road.....Charlotte
 Recording Secretary: Mrs. C. H. Jarrett, Jr.
 1449 Sterling Road.....Charlotte
 Historian: Mrs. Fenton S. Cunningham.....Asheville
 Parliamentarian: Mrs. J. M. Kilpatrick.....Robersonville

NORTH CAROLINA DENTAL HYGIENISTS'
ASSOCIATION OFFICERS—1959-60

President: Mrs. Vee Copes Hoppe, 521 A Wakefield Drive.....Charlotte
 Vice President: Miss Estelle McClure
 T-14 Beverly Apartments.....Asheville
 Secretary: Miss Isabel A. Holbrook, 2711 Haverford Place.....Charlotte
 Treasurer: Mrs. Loretta Preece Angstadt, 707 C Daniels St.....Raleigh

Code of Ethics



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**North
Carolina
Dental
Society**

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May, 1959



Code of Ethics

of

The North Carolina Dental Society

The *Code of Ethics* of the North Carolina Dental Society is based on the *Principles of Ethics* of the American Dental Association. Additional provisions and interpretations have been provided to better define what constitutes ethical professional conduct for members of the North Carolina Dental Society.

The sections conform to those of the *Principles of Ethics* of the American Dental Association.

Section 1. *Education Beyond the Usual Level.*—The right of a dentist to professional status rests in the knowledge, skill and experience with which he serves his patients and society. Every dentist has the obligation of keeping his knowledge and skill freshened by continuing education through all of his professional life.

Section 2. *Service to the Public.*—The dentist has a right to win for himself those things which give him and his family the ability to take their proper place in the community which he serves, but there is no alternative for the professional man in that he must place first his service to the public.

The dentist's primary duty of serving the public is discharged by giving the highest type of service of which he is capable and by avoiding any conduct which leads to a lowering of esteem of the profession of which he is a member.

Section 3. *Government of a Profession.*—Every profession receives from society the right to regulate itself, to determine and judge its own members. Such regulation is achieved largely through the influence of the professional societies, and every dentist has the dual obligation of making himself a part of a professional society and of observing its rules of ethics.

Section 4. *Leadership.*—The dentist has the obligation of providing freely of his skills, knowledge and experience to society in those fields in which his qualifications entitle him to speak with professional competence. The dentist should be a leader in his community, especially in all efforts leading to the improvement of the dental health of the public.

Section 5. *Emergency Service.*—The dentist has an obligation when consulted in an emergency by the patient of another dentist to attend to the conditions leading to the emergency and to refer the patient to his regular dentist who should be informed of the conditions found and treated.

Section 6. *Use of Auxiliary Personnel.*—The dentist has an obligation to protect the health of his patient by not delegating to a person less

qualified any service or operation which requires the professional competence of a dentist. The dentist has a further obligation of prescribing and supervising the work of all auxiliary personnel in the interests of rendering the best service to the patient.

It is unethical for a dentist to allow auxiliary personnel to perform any dental service prohibited to such personnel by the dental laws of the State of North Carolina.

It is unethical for a dentist to permit a dental hygienist in his employ to solicit patients or act in collusion with a dental hygienist for such solicitation.

Section 7. Consultation.—The dentist has the obligation of seeking consultation whenever the welfare of the patient will be safeguarded or advanced by having recourse to those who have special skills, knowledge and experience. A consultant will hold the details of a consultation in confidence and will not undertake treatment without the consent of the attending practitioner.

When a patient goes to a dentist for a professional opinion, and does not signify he is undergoing treatment by, or has consulted another dentist, the consultant may submit his findings and recommendations direct to the patient.

Section 8. Unjust Criticism and Expert Testimony.—The dentist has the obligation of not referring disparagingly to the services of another dentist in the presence of a patient. A lack of knowledge of conditions under which the services were afforded may lead to unjust criticism and to a lessening of the patient's confidence in the dental profession. If there is indisputable evidence of faulty treatment, the welfare of the patient demands that corrective treatment be instituted at once and in such a way as to avoid reflection on the previous dentist or on the dental profession. The dentist also has the obligation of co-operating with appropriate public officials on request by providing expert testimony.

Section 9. Rebates and Split Fees.—The dentist may not accept or tender "rebates" or "split fees."

When a patient is referred by one dentist to another, other than an associate in his own office, for consultation or for treatment, whether the dentist in charge accompanies the patient or not, it is unethical to give or receive a commission by whatever term it may be called or under any guise or pretext whatsoever.

It is unethical for any dental organization or individual dentist to publish or make public in any form any fee schedule.

Section 10. Secret Agents and Exclusive Methods.—The dentist has an obligation not to prescribe, dispense or promote the use of drugs or other agents whose complete formulae are not available to the dental profession. He also has the obligation not to prescribe or dispense, except for limited investigative purposes, any therapeutic agent, the value of which is not supported by scientific evidence. The dentist has the further obligation of not holding out as exclusive, any agent, method or technic.

Section 11. Patents and Copyrights.—The dentist has the obligation of making the fruits of his discoveries and labors available to all when they are useful in safe-guarding or promoting the health of the public. Patents and copyrights may be secured by a dentist provided that they and the remuneration derived from them are not used to restrict research, practice or the benefits of the patented or copyrighted material.

Section. 12. Advertising.—Advertising reflects adversely on the dentist who employs it and lowers the public esteem of the dental profes-

sion. The dentist has the obligation of advancing his reputaton for fidelity, judgment and skill solely through his professional services to his patients and to society. The use of advertising in any form to solicit patients is inconsistent with this obligation.

Dentists practicing a specialty of dentistry may mail charts, reprints, or personal communications to those members of the profession, but shall not be privileged to circularize the profession at large with charts, reprints, or any matter that is obviously a subterfuge for advertising.

It shall be considered unethical for any member of this Society (other than an official health officer issuing formal health bulletins), to issue, or cause to be issued, by interview or otherwise, any statement to the press or other non-dental publication, dealing with scientific dental matters, unless such member shall have received authorization from the appropriate council or committee of this Society. Upon receiving such authorization the member shall make a transcript of whatever public statement is to be issued and compare such transcript with the reporter's copy, for approval, or correction if necessary, previous to the publication.

Writing for the laity is not disapproved, provided (1) the publication in which the article is to appear is of a responsible and reputable character; (2) the subject matter and manner of its presentation are essentially educational in effect, and not of an advertising nature.

In broadcasting over the radio or television whether in person, or participation of dentists in commercial broadcasting programs, such broadcasting is not disapproved, provided (1) the subject matter and manner of presentation is essentially educational; (2) the dentist does not endorse the products of the organization sponsoring the broadcast; (3) the announcer's continuity is acceptable, in that no exaggerated or unwarranted claims are made.

No member shall permit his or her photograph to be published in the public press or other publication not of a dental nature, in such a manner or context as would be used for advertising his or her practice.

Such articles, personal interviews, or broadcasts over the radio, must not tend to aggrandize the dentist by referring to any singular achievement, such as unique or outstanding methods or practice, or in any way imply personal superiority or ability to perform any dental service in a superior manner (Dental Law). It is also expressly forbidden to have such publicity carry the dentist's office address.

Dentists who are members of this Society shall comply with laws of the State of North Carolina relating to the practice of dentistry. Any dentist who shall be reprimanded, disciplined, or sentenced by final action of any court or other authority of competent jurisdiction, pursuant to the laws of the State of North Carolina governing the practice of dentistry or any court action reflecting unfavorably on the dentist shall therefore render him or herself liable to discipline by the Society, as provided in the By-Laws of the Society.

Section 13. *Cards, Letterheads and Announcements.*—A dentist may properly utilize professional cards, announcement cards, recall notices to patients of record and letterheads when the style and text are consistent with the dignity of the profession and with the custom of other dentists in the community.

Announcement cards may be sent when there is a change in location or an alteration in the character of practice, but only to other dentists, to members of other health professions and to patients of record.

Cards in newspaper, programs, etc., shall not be carried by any member of the Society. Following the opening of an office, announce-

ments may be put in the newspaper for ten (10) consecutive issues, but may not be over one (1) column wide nor over one and one half (1½) inches high. Cards with the proper announcement printed thereon may be mailed to bona fide patients of record, in cases of opening or changing office location.

It shall be deemed unethical for a member to list on his letterhead, prescription blank, card or professional stationery a specialty designation unless he meets the requirements outlined in Section 19 regarding specialty listings in directories.

Section 14. Office Door Lettering and Signs.—A dentist may properly utilize office door lettering and signs provided that their style and text are consistent with the dignity of the profession and within the custom of other dentists in the community.

Modest size lettering may be used to announce name, title and profession on office door or windows, or at the entrance to the office. Large display signs or peculiar lighting or unusual objects or characters of any kind or description shall be deemed unethical. Signs shall be limited in number to those essential to indicate to prospective patients the location of the office. The wording on signs shall be limited to the title, name, initials of degree, or the word "Dentist." The word "Dentist" on a sign without the dentist's name within a contiguous area is prohibited.

Limitation of practice to a specialty may be noted on the office entrance door provided it is not visible from the street, and provided the wording is "Practice Limited to (Specialty)" in lettering which does not exceed 1" in height.

The height of lettering on signs shall not exceed two (2) inches on street level or within 10' upward of same. Signs on the second story and upward shall be lettering not to exceed four (4) inches in height. Signs having two lines must have their permissible size of lettering reduced 25 per cent. No window sign or above street level sign shall exceed 8" x 24" overall.

It shall be deemed unethical for members of this Society to continue to display on signs or stationery the name of another practitioner whose practice is assumed or bought for any consideration, for a period longer than six months.

Section 15. Use of Professional Titles and Degrees.—A dentist may use the titles or degrees, Doctor, Dentist, D.D.S. or D.M.D., in connection with his name on cards, letterheads, office door signs and announcements. A dentist who has been certified by a specialty board for one of the specialties approved by the American Dental Association may use the title "diplomate" in connection with his specialty on his cards, letterheads, and announcements, if such usage is consistent with the custom of dentists of the community. A dentist may not so use his title or degree in connection with the promotion of any drug, agent, instrument or appliance.

The use of eponyms in connection with drugs, agents, instruments or appliances is generally to be discouraged.

Section 16. Use of the Terms "Clinic" and "Group Practice."—Unless the use of the term "clinic" has long been established by the custom of dentists in a community as applicable to a dental practice, it is strongly recommended that the term "clinic" be limited to designate public or quasi-public institutions established on a non-for-profit basis for the purpose of providing dental health care.

The use of the term "group practice," in accordance with the following definition, is recommended as applicable to a dental practice and as

an alternative to the term "clinic" when its use is consistent with existing statutes and the custom of the dentists in the community.

Group practice is that type of dental practice in which ethical, licensed dentists, sometimes in association with members of other health professions, agree formally between themselves on certain central arrangements designed to advance the economical and efficient conduct of a dental practice in order to render an improved health service to the patient.

Using the name "Clinic," "Institute," "Center," or any other title that may suggest a public or semi-public activity, to designate what is in essence an individual or group private practice is misleading and, therefore unethical.

Section 17. *Contract Practice.*—A dentist may enter into an agreement with individuals and organizations to provide dental health care provided that the agreement does not permit or compel practices which are in violation of this *Code of Ethics*.

It shall be unprofessional for a dentist to dispose of his services under conditions that make it impossible to render adequate service to his patient or which interfere with reasonable competition among dentists of a community. To do so is detrimental to the public and the individual dentist and lowers the dignity of the profession. By the term "contract practice" as applied to dentistry is meant the carrying out of an agreement between a dentist or a group of dentists, as principals or agents and a corporation, organization or individual to furnish partial or full dental services to a group or class of individuals for a definite sum or a fixed rate per capita. Specifically, contract practice is unethical: (1) where there is solicitation of patients, directly or indirectly; (2) when there is underbidding to secure the contract; (3) when the compensation is inadequate to assure good dental service; (4) when there is interference with reasonable competition in a community; (5) when free choice of a dentist is prevented; (6) when conditions of employment make it impossible to render adequate service to the patients; (7) when the contract because of any of its provisions or practical results is contrary to sound public policy.

The foregoing provisions declaring contract practice to be unprofessional and unethical shall not apply to any city, county, state or national health officer insofar as their official duties are concerned.

Any contract practice agreement entered into by a member of this Society should be cleared through the proper agency of this Society, viz., the Ethics Committee.

Section 18. *Specialization and Limitation of Practice.*—A dentist has the obligation of not holding himself out as a specialist unless he has met requirements of additional experience and education consistent with the standards of dental practice in the community. A dentist may announce himself as a specialist only in one of the specialties approved by the American Dental Association. If a dentist limits his practice to one of the specialties approved by the American Dental Association, he may include that information in his announcements consistent with state laws or the custom of the dentists of the community where there is no applicable state laws.

Section 19. *Directories.*—A dentist may permit the listing of his name in a directory provided that all dentists in similar circumstances have access to a similar listing and provided that such listing is consistent in style and text with the custom of the dentists in the community.

It is unethical for any dentist to list his name in any directory as a specialist unless he is devoting his entire practice to that specialty.

Section 20. *Health Education of the Public.*—A dentist may properly participate in a program of health education of the public involving such media as the press, radio, television and lecture, provided that such programs are in keeping with the dignity of the profession and the custom of the dental profession of the community. Provided further, that such programs are approved by the local or district dental Society in that area.

Section 21. *Judicial Procedure.*—Problems involving questions of ethics should be solved at the local level within the broad boundaries established in this *Code of Ethics* and within the interpretation of the code of ethics of the component society. If a satisfactory decision cannot be reached, the question should be referred, on appeal, to the constituent society, the Judicial Council of the American Dental Association, and the House of Delegates of the American Dental Association, as provided in Chapter I, Section 40-G, H and I of the *Bylaws* of the American Dental Association.

It shall be unethical for any dentist to refer a patient to a commercial dental laboratory, or an individual dental technician for the taking of a shade, impression, adjustment or repair of any dental restoration or appliance.

It is also unethical for a dentist to refer any patient for any health service or medical diagnosis or treatment to any person or persons other than duly licensed practitioners under the laws of the State of North Carolina.

It is unlawful and unethical for any dentist to conspire with any dental technician or licensed hygienist to violate the restrictions placed upon them by the dental laws of the State of North Carolina. It shall be a breach of the *Code of Ethics* for a member not to supply laboratories with laboratory work authorization, commonly referred to as "Prescriptions" for all work sent to a laboratory for fabrication or processing.

PENALTIES

Any violation, infringement, or breach of this *Code of Ethics* may be deemed sufficient cause for censure, suspension, or expulsion from the Society as ordered by the Ethics Committee of this Society as provided in Article 1, Section 7 of the *Bylaws* of this Society.

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Adopted by the House of Delegates of the North Carolina Dental Society, May 4, 1959.



